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THE CHRISTMAS SPIRIT

BY LILLIAN M. KOUDELKA, R.N.

IT IS Christmas tide. The hum, the whir and the buzz of Santa's factories have ceased and all his helpers are met in a vast assembly to receive their Christmas instruction.

"And you, little Elf of the Christmas Spirit," said Santa Claus, "will go to the Chicago State Hospital to dispense cheer and make them happy."

"Oh, Santa!" cried the little elf greatly distressed, and rushing up to Saint Nick, "I beg of you, do not send me out among those insane people. I am afraid, and besides they are crazy and cannot appreciate what I represent."

"Fie! that is not the true spirit that you typify. Remember, these people are mentally sick and lonely and are in dire need of your aid. I shall, however, send the Fairy Who Attends to Things with you. She has been there before and can help you greatly. Get thee gone, because this afternoon their Christmas program begins."

In a twinkling they had departed and soon found themselves outside the gates of the great Chicago State Hospital. The Fairy Who Attends to Things walked bravely through the gate dragging the little Elf of the Christmas Spirit.

"Look, Christmas Spirit! See this little city, this is Dunning. Oh, isn't that Christmas tree in front of the administration building beautiful, with its diverse colored lights and the silver tinsel? See the wreaths and garlands of holly in every cottage window. Why, the whole atmosphere is fairly permeated with the spirit of Christmas. Gracious! It is two o'clock, we must hurry to the men's receiving ward. Follow me."

They hurried down the sidewalk to C. W. 18, and as they entered the building they heard one of the nurses say:

"Yes, each ward, all over the institution, has a Christmas tree. The patients take great delight in helping to decorate the trees and wards. This year we are using holly and poinsettias for the interior adornment."

"Oh, little Fairy Who Attends to Things, come quickly!" cried the Christmas Spirit, very excitedly, from a door down the hall where he had wandered. "Who are all those men sitting around the tables in the dining room? They are all pulling sweaters on over their heads. Isn't that funny?"

"Those are our boys," said the little fairy rather sadly. "The American Legion has just given the ex-service men out here a dinner. They have just passed the Christmas boxes. Let me

see what that old darkey wants. He is beckoning to us.

"How do you do, Arnold?" How are you today?"

"Good afternoon, ma'am," replied the old man, "Oh, Ah's just feelin' fine. Ah reckon' I'se de oldest man heah today, 'cus Ah fought in the Spanish-American War. Dey shor don' show no partiality heah. I's treated better den Ah was at home. See dis box wid games, candy, nuts, fruit, and ebery one ob us got a new sweater. Isn't dat great?"

"It certainly is. Well, Merry Christmas, Arnold," said the fairy. "Thank you, Miss, and many ob dem," he replied.

"Where are you going?" asked the fairy when she saw the elf leaving the dining-room.

"I'm going to find the program for tonight. I'm certain that I saw it in the office when we entered. Do you want to come along?" answered Christmas Spirit.

They walked into the office and scanning the bulletin board soon found the outline for the holidays.

"Here it is, Monday night. It is composed of songs, dances, readings and piano duets. I'll bet that will be good."

"I'm so tired from my long trip today," complained the little fairy, "I believe that I'll just rest tonight."

"That's a good idea," agreed Christmas Spirit. "I don't think they will miss us at the program tonight and besides we must be real peppy for the party tomorrow afternoon which is to be given by the Occupational Therapy Department."

With this suggestion, Christmas Spirit and Fairy retired and slept the sleep that only the really tired can enjoy.

"Oh, little Christmas Spirit," cried the fairy, wakening suddenly from her refreshing sleep, "it is one o'clock and the party starts at two. We will have to hurry or we'll be late."

In a flash of a second they were out of bed, dressed, and in the Assembly Hall. They saw long lines of men and women entering the building. They were laughing and talking as though they were anticipating a good time.

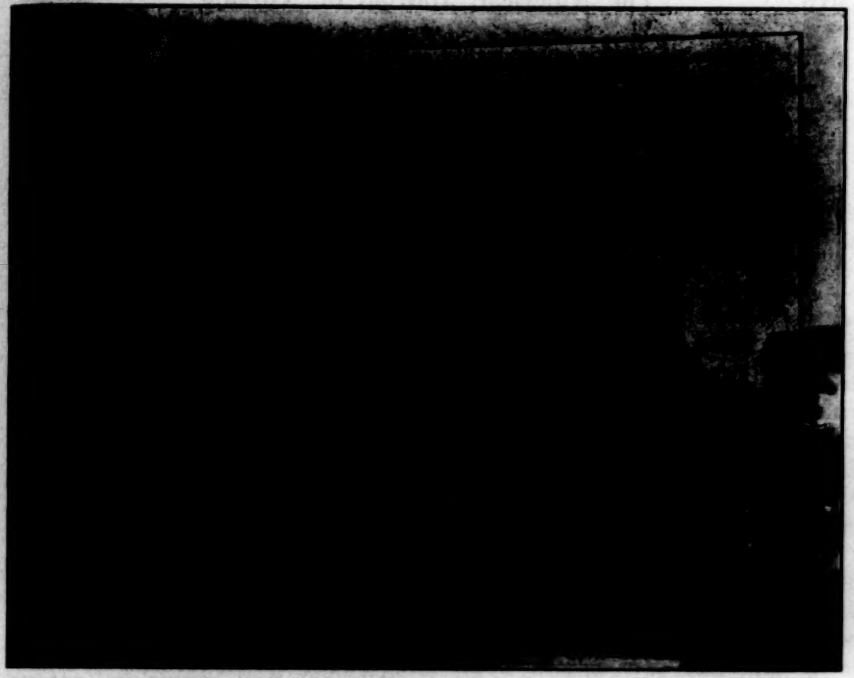
"Are those patients?" asked the elf incredulously. "Surely they can't be; why, they are acting like normal people."

"Yes, they are patients," said the Fairy Who Attends to Things. "Why, they enjoy the same things that you and I do."

When the last patient had been counted in, the two elves slipped into the Amusement Hall.

It is a spacious room with a seating capacity of about one thousand people, and every seat was filled. It was beautifully decorated. Garlands of red and green paper streamers hung from the ceiling lights. Wreaths and festoons of holly were draped about the sidelights and hung in the windows. In the front of the large hall, on either side of the stage, stood two huge Christmas trees beautifully decorated and brilliantly lighted with colored lights.

As the sprites were gazing at the resplendent trees, the curtain began to rise. A great silence pervaded the hall, followed by a deafening applause. There on the stage was a home-like setting with a realistic fireplace on which were hung four stockings. A



CHRISTMAS PARTY GIVEN BY THE OCCUPATIONAL THERAPY DEPARTMENT, ILLINOIS STATE SCHOOL OF PSYCHIATRIC NURSING

clock stood on the mantle and four chubby children lay sleeping on the hearth.

While the patients were admiring the scene, some joyously, others with tears in their hearts, thinking of their wee ones at home, a contralto voice floated out across the audience. It was singing the well-loved Christmas carols from every nation. Following this, a violin selection from Rubinstein charmed the enraptured listeners and was greeted with a thundering applause. Listen!

'Twas the night before Christmas,
And all through the house,

boomed out a bass voice. On and on went the voice. Soon it came to this part of the story:

As I drew in my head
And was turning around,
Down the chimney Saint Nicholas
Came with a bound.

And out of the fireplace came Santa Claus with his bundle of toys. Such shrieks and yells of delight as pierced the air!

After Santa had distributed bags of candy and boxes of cracker-jack to all the patients, the occupation-therapy teachers served them with a delicious luncheon.

"Wasn't that just loads of fun?" enthusiastically exclaimed Christmas Spirit to the fairy.

The rest of the holiday season was a busy one for the two little sprites. They hurried here, there, and

everywhere, making the occasion festive by their presence. At the nurses' party, they helped Santa make merry and rejoiced with each one over her gifts.

On Christmas Eve they went to all the wards and helped with the distribution of gifts, Christmas stockings, cigarettes, candies and fruits.

"Gracious, but I'm tired," said the little elf when they finally reached their room. "But I feel doubly repaid for all my efforts. Good night, Fairy Who Attends to Things."

Joy to the world,
The Lord has come—

"Fairy! Fairy! Wake up! Who is that singing?" inquired Christmas Spirit excitedly.

They rushed to the window and looking out they saw the nurses wending their way from cottage to cottage in the cold clear dawn. It was a beautiful spectacle to watch, with the flickering candles revealing their faces and one heard the crunch of their feet upon the snow, as they willingly did their bit, to help make the patients happy.

Later on in the morning the elves attended the religious services with the patients. They listened to the oft repeated story of the Christ Child and were awed with the beauty of the service.

The rest of the week flew by as though on magic wings. New Year's Eve found the two elves in their room, preparing to attend the New Year's ball. They were discussing some of the features of the programs that followed Christmas.

"How did you like the movies, on Friday?" asked Fairy.

"It was great, but didn't you like that professional dancer and that one-act comedy from the Central Park Theater? And wasn't that concert wonderful that they had on Monday?" said Christmas Spirit.

"I think that I like the program that the students from the Chicago Normal School of Physical Education presented, best," replied the fairy. "The grace, the skill and the beauty displayed by them enraptures me still. I almost thought that I was back home watching them dance in the fairy glen. Let's go to the dance now."

The New Year ball was the evening set aside for the patients to do the performing. Such a bizarre crowd! The men and the women came dressed for the occasion. The primitive love of displaying color was dominant and helped make the dance more fanciful. Ah, the joy in watching them, eagerly exhibiting their gregarious natures, happy to mingle with each other like normal people. How they danced, some the new dances, others the old, but happiness radiated from every face.

"Oh, I'm so sleepy, but oh, so contented, because I have had a little share in making these thirty-six hundred patients happy. I do hope Santa will let me come back next year," murmured the Christmas Spirit.

REPORT OF I. C. N.

Official reports of the meeting of the International Council of Nurses at Helsingfors will be available at the office of the Council, 1 Place du Lac, Geneva, Switzerland, on December 15. The price is seventy-five cents per copy. A list posted at the Headquarters in Finland was signed by 350 persons. Doubtless many others who attended and many who did not will welcome this opportunity to purchase copies. The issue will not be large, so orders should be placed immediately by those desirous of having this valuable historical record for teaching or other reference.

MAKE YOUR INCOME SERVE YOU

By Edith Charlton Salisbury

Second Article

AS AN illustration of how the suggested plan—outlined in a previous article—can be applied in an actual case, let us assume you are a private duty nurse whose total income is $2,000 a year. We shall assume, too, that you have no dependents, therefore the amount of your Federal income tax, according to the law in force in 1924, will be $15. You have also decided to save for some permanent purpose 15 per cent, or $300, of your annual income. Deducting these two items—income tax and saving—from $2,000 a year, will leave you a working fund of $1,685 a year, or about $140 a month. When you have set aside the amount you will save, and what the Government requires of you as a citizen, you will be free to spend $140 a month with a clear conscience, and we shall assume that you have apportioned that amount in this way:

	Per month
Shelter, a share in an apartment	$ 30.00
Food	16.00
Clothing	30.00
Laundry and cleaning	12.00
Health maintenance	5.00
Church and benevolence	12.00
Incidentals,—as stationery, postage, telephone, car fare, etc	10.00
Advancement or self-improvement	25.00
Total	$ 140.00

Remember this tentative budget is merely a suggestion. It is something to work from rather than to follow. It may give you an idea and help you to adjust your own expenses to your income. After all, it depends upon where you live, under what conditions, and the type of individual you are, whether some or all of these items will need to be lessened or increased.

Where Shall She Live?

An analysis of some of these expenditures is interesting. Unlike the nurse employed in a hospital or other institution, the private duty nurse, or the nurse in a physician's office, the Red Cross, or the visiting nurse, must provide herself with a permanent place to live. This nurse will need to be even more particular about this item of expense than the nurse on special duty in a hospital who may live at her patient's expense for weeks at a time. But in any case, the nurse's home must be comfortable and in congenial surroundings. In cities and the larger towns, two, three or four graduates from the same school very frequently rent an apartment coöperatively, dividing the expense of rent, light and telephone equally between them and each paying her share of the food bills when she is at home. That plan makes it possible to secure comfortable living quarters at less expense and usually more freedom than when each has a room to herself in a private home, or has her own apartment. A nook, no matter how small and humble, that each person may consider absolutely her own seems to be essential to every normal woman. How much of her income she should reserve for it depends largely upon the nurse's temperament, but it would seem as if

$30 a month—$1 a day—should be amply sufficient for the private duty nurse who is away from home much of her time. The nurse in the large city, where rents are exorbitantly high at present, may find it necessary to increase the sum allowed for shelter from $10 to $15 a month, particularly if she finds it necessary to have her private apartment. But in that case there no doubt will be facilities for getting breakfasts and other meals when she is off duty and this will reduce her food bill.

Allowance for Food

The cost of food probably troubles the private duty nurse less than it does some other workers for, as a rule, her daily meals are part of her remuneration. Her patient pays for them at the hospital or at home. The nurse in an institution has board and room allowed, also laundry expense, but a nurse in a physician's office is generally expected to find her own living.

The private duty nurse should be able to provide all her extra meals and those while off duty for an average of $16 a month, even in large cities. Physicians' nurses, whose salaries do *not* include an allowance for food, have told me that by preparing most of their meals themselves they can live well on $30 a month. This sum is ample, surely, when two or three are sharing expenses in an apartment.

Wherewith Shall She Be Clothed?

The clothing requirements of professional nurses are peculiar to themselves. They must practically have two complete sets of wardrobe,—one for duty, the other for private and social life. Because of the sameness of their uniform—though it is the most attractive uniform in the world—and the fact that they wear it about 75 per cent of their time, many nurses are inclined to be extravagant in their dress for private life. Almost constantly in white that is severely plain in design, when they dress for the street, or for a social affair, there is a strong desire for color, expensive materials, the latest mode and the last word in accessories and this very often tempts the average nurse to make her clothing budget top-heavy. It seems nothing short of heartless to find fault with her. An analysis of what she has on hand, the requirements for next season, and conditions under which she lives may help to map out a clothing budget.

An Actual Budget

A nurse of my acquaintance, who for a number of years has been employed in a physician's office with an assured salary of $2,000 which is occasionally increased a few hundred dollars a year by taking special outside work, has given me permission to use her schedule of expenses and her clothing budget for one year. This nurse lives alone in an apartment costing $45 a month. It is expensive, but it is her chief pleasure, and gives her opportunity to prepare most of her meals, serving to herself the kinds of food which suit her best; it also gives opportunity to do considerable sewing in the evenings at home.

This is the budget as she gave it to me:

	Per Year
Rent	$ 540.00
Clothing	384.00
Food	365.00
Laundry	80.00
Cleaning	24.00
Telephone	18.00

Electricity	18.00
Gas for cooking	3.00
Car fare	10.00
Vacation	100.00
Church and charity	200.00
Permanent saving	477.00

Magazines, association dues, and such items as stationery, postage, newspapers, theater and concerts were accounted for in the "extra" from outside work. As this nurse is particularly well dressed, an itemized statement of her clothing expenditure for the past year is interesting. She states:

Last year and the year before my clothing budget was unusually high because I had let my wardrobe run down sadly the year previous, in order to buy furniture for my apartment and a sewing machine. But I have been able to keep everything going and now will get ahead if all goes well.

For one year this nurse's clothing expenditure was:

Material for summer dress in 1924	$ 15.00
Sport suit	30.00
Waist	5.00
Blouse	10.00
Spring coat	45.00
2 pairs gloves	7.00
1 pair sport shoes	8.00
2 pairs Oxfords	20.00
Silk stockings	12.00
Silk and wool stockings	5.00
Underclothing	10.00
Silk and wool union suits	12.00
Nightgowns	6.00
Corsets	12.00
Dress hat	20.00
Business hat	12.00
Winter coat (bought in February)	47.50
Dress material for spring and summer, 1925	38.50
Ready made dress	31.50
Six new uniforms and six new slips	37.50
Total	$ 384.00

Ordinarily this nurse does not spend more than $30 a month on clothing and she is unusually well apparelled, a result which she obtains by carefully inventorying her wardrobe and planning ahead for at least a year.

Things Not Material

One of the most important divisions of the budget is that of education or self-development. It is a division frequently left until everything else has been provided for and is sometimes neglected entirely. This would be true of the person who lacks vision, who is not ambitious, and who merely sees in her work a living for today. This division includes so many necessary expenditures that it is wise to try to increase, rather than reduce, the amount given in the suggested budget. Books, magazines, lectures, concerts, association dues, travel, recreation, vacation expenses, extra courses of study, Christmas and other gifts, all come under the head of self-development since the doing, or acquiring of, any one of them should be undertaken with the desire to develop the spiritual part of one's nature.

The variety and scope of this division indicate how important it is to analyse its items very carefully to determine just how much should be allotted to each one and which should be given first place in your program during any year.

Certainly the graduate nurse should never omit from her budget an allowance for her professional magazines and membership fees in alumnae and graduate associations. These are the avenues through which the busy nurse must keep abreast with her profession and with the younger women who come into the nursing field each year, fresh, keen

and enthusiastic, from the training school and laboratories.

The minimum amount that can be allowed for professional advancement may be tentatively suggested as $10 a year fees in a nurses' registry; $6 annual dues in alumnae association; $3 membership dues in Graduate Nurses' Association and $3 for *The American Journal of Nursing*. Many nurses find it very much to their advantage to subscribe to more than one professional magazine and to have their names in more than one registry. And then the necessary books must have a share.

Besides these fees, every nurse should be actively interested in at least one social organization, for the purpose of keeping in touch with people and affairs outside her own line of work. The old proverb about all work and no play making dullards of us is as true now as it ever was. And as true of nurses as of any other workers.

The amount spent in a year for health maintenance depends upon the nurse's personal needs and what she can do herself to keep physically fit. Under this division is included care of hair, feet, manicuring, massage, gymnasium, or other forms of setting-up exercises, also toilet supplies, and such like.

Incidentals

I don't like the word. The very uncertainty of what it implies is a temptation to include in this division nonessentials and occasional extravagances. But for a better term we class postage, stationery, car fare, express charges, as incidentals.

Building Character

After trying a definite system of apportioning your income and making a persistent effort to have your earnings really serve your needs, you may be agreeably surprised to find that your standard of living has changed. The passing whim which formerly demanded much of your income is now not likely to be gratified until the real need has been provided for. Last but not least the keeping of a budget will give you a broader outlook on what is really important in material things and may help you to adopt a higher standard of living.

Some one has said: "Budget making makes you think, but carrying one out builds character."

THE WORLD COURT

*A topic which has been discussed at a number of organization conventions this year is the question of United States adherence to the Court. Many groups, formed specifically for professional purposes, have adopted resolutions urging action on the World Court at the coming session of the Senate. The American Bar Association, * * * the California, Delaware and Wisconsin Nurses' Associations are on this list,—to mention only a few.*

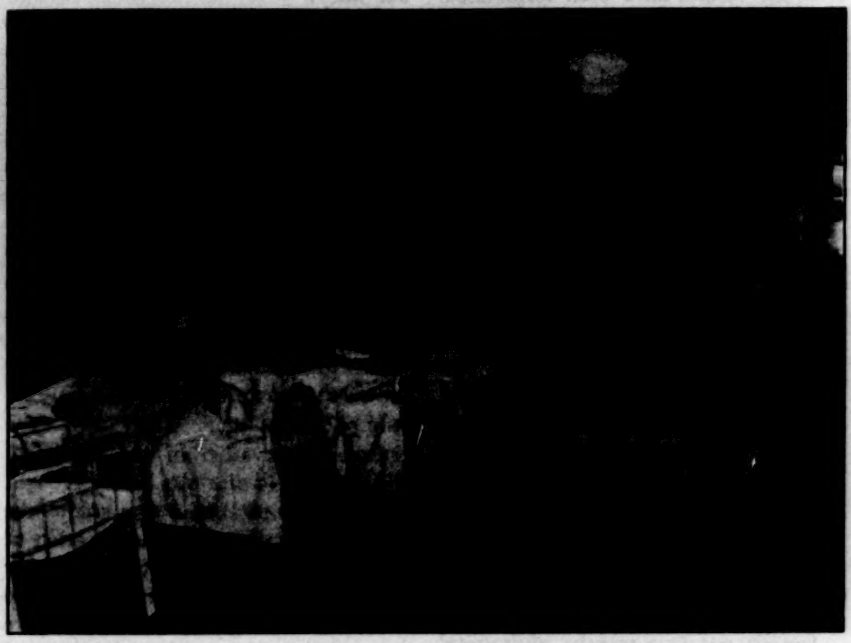
The Senate agreed last March, by a vote of 77 to 2, to begin consideration of the World Court on December 17. There seems to be a great deal of support for the Court in official circles and throughout the country. The House of Representatives (which does not usually urge action upon the Senate) passed a resolution last spring, expressing its "earnest desire" for early adherence to the World Court on the Harding-Hughes-Coolidge terms.

*Throughout the country there is evidence of strong popular desire for discussion and settlement of the question in the Senate. Even those opposed to the Court itself feel that the matter should be fully debated and voted upon. * * **

Mass meetings are to be held in many places before December 17 for the purpose of obtaining an expression of public opinion on this important question. Are you doing your part?

MUSIC'S NEW VOCATION

By Isa Maud Ilsen, R.N.



The Carol Club (Catholic) of New York Singing in the Wards of the Metropolitan Hospital at Christmas Time

MUSIC IN the treatment of the sick, because of its health-giving effects, is not unprecedented, as can be verified by records in sacred and secular history from the earliest times.

Every one is familiar with the Biblical story of Saul and his restoration to health by David's song and harp. Music was used by the ancient Greeks to treat the sick, centuries before our modern methods of hospitals came into existence. Grote, in his History of Ancient Greece, relates how the Spartans invited Thalateas, a musician of Crete, to Sparta in time of trouble, and they testify that his art contributed to heal the sick and stop the pestilence then raging. This was 620 B.C.

During a period of many years hospitals have tried music spasmodically in the treatment of disease, until today it is fast becoming a recognized agent for good, and it is not too great a stretch of the imagination to visualize music as a vital branch of hospital regime within a few years.

The "Corridor Singing," established in 1860 in St. Thomas' and other London hospitals grew out of Florence Nightingale's request for music in the hospitals during the Crimean War.

Music as a curative factor in sickness

has long been a subject of study by physicians, though, as yet, no exact scientific results have been formulated.

The Lancet, London, May, 1891, published articles from which the following is taken:

> The value of music as a therapeutic agent cannot be so precisely stated that we may measure it by dosage. Of its wholesome influence in various forms of disease, however, there can be little or no doubt. In making this assertion we do not, of course, assign to it any specific or peculiar action. It is no quack's nostrum, no reputed conqueror of ache or ailment. It is only, as we have already shown in a recent article, one of those intangible but effective aids of medicine.

To come to our own times and my own personal experience with music in hospital wards—this began when I was in a school for nurses.

From childhood I had had musical training and a great appreciation of the relation of music to humanity, also a vision of its immense value, if properly used, in functional disorders.

During my first months of hospital life I keenly felt the gloominess and depression, and all my time "off duty" was spent at concerts. Then I thought,

> If I, who possess health which positively radiates, have such a craving for music, what of the patients whose ambition is at its lowest ebb and discouragement at its highest point, suffering from the melancholy attendant upon illness and in the mental idleness of hospital life—what of them?

Very soon there came to me a realization of their feelings as they, themselves, expressed their longings. Some wanted to "hear a piece on the piano," others wished to hear stringed instruments, a banjo, a violin; the wee tots, when I tucked them in at night, would wistfully say, "Sing somethin' like mother does, so I go to sleep." Even the children from the slums would speak of and long to hear "the hand-organ in our alley."

One night an old Irish woman suffering so much from inflammatory rheumatism that she could not sleep, although she had been given "quantum sufficit" of an opiate which failed to quiet her, tossed and moaned. I began softly to sing an old Irish tune—soon she slept.

As the years went on, the more convinced I became, from my many opportunities of study, that music means much—we cannot estimate how much—to sick folk, especially to those who, owing to the nature of their diseases, are compelled to remain in hospitals for long periods of time.

From observation of the results of the little music that was kindly brought to us, I soon began to study the requisites for the proper application of music as an adjunct to the other branches of hospital treatment, and the great need for *organized music* for these sufferers gradually developed in my mind.

By "organized music," for want of a better term, I mean, (*a*) rightly chosen as to words, character of composition, tone color, rhythm, repetition, all so combined as to soothe, to give hope, to stimulate interest in life, to those hearing it; (*b*) music that is appropriate, that is rightly rendered by the right people, by musicians possessed of a personality to bring cheer, able to go through their part undaunted by any emergency that may arise in the ward, artists who will so render the music they bring that the patients will say with Emerson,

> The music in our hearts we bore
> Long after it was heard no more.

The nerves and memories of the sick retain impressions of the music and the musicians, much longer and more vividly than do the normally active with many diversions.

The psychological state of a sick person is usually exceptionally sensitive, and what may seem an insignificant detail to one in health may assume great importance to the same person when ill. So I came to realize that music, if it is to be an adjunct to hospital regime, must be organized, even as any other part of the service. Dr. Egbert Guernsey says that every hospital should have a director of music who shall carefully choose such selections and artists as shall reach every patient and every kind of disease.

While I am interested in every form of hospital music, it is the programs for the ward patients that I especially stress, for one cannot exaggerate the wonderful good these carefully planned programs have on the patients when brought to their very bedsides; and, inversely, the effect of the wrong kind of program—a program which depresses and lowers the vitality even of well people.

The rules formulated for these ward musical programs are too lengthy to be given here, but one of the outstanding features is based on hospital ethics, for coöperation of doctors, nurses and hospital staff must be secured in order to bring the best results.

In over two decades of experimentation on the effects of music in hospitals and sanatoria, many physical, emotional and spiritual reactions have been encountered. I have had vital experiences of what Dr. James Frederick Rogers expresses, "the introduction of music into hospitals for the wounded in our war has, of course, served a place which no other means could well usurp."

From the hundreds of musical programs at the bedside of tuberculous patients and the beneficial results, I heartily advocate that this psychological treatment of every tuberculous patient should begin on the day he is admitted, and I have come to realize how important it is to have a musical program when a patient first enters the wards. Many a homesick, weeping person has been changed into a smiling, helpful one by hearing a song as a sort of friendly greeting from the people of the hospital, showing great pleasure when laughingly told that this was his or her serenade. Dr. Adolphus S. Knopf says, "I have found that music gives the T.B. patient hope and cheer when it is absolutely necessary to recovery." And he continues, "It is even wise in some public institutions to pay for such entertainments, as they are sure to help in the cure of the T.B. invalids and render their necessary sojourn in a sanatorium or hospital of shorter duration."

Come with me into one of the wards. Walk with me between the lines of hospital beds. Watch the listless eyes begin to shine as the music begins; watch the faces brighten; see the worried lines relax; observe the breathing become free and rhythmic; see, also, a nervous sleepless person doze off into fitful slumber then into a peaceful sleep; note the calm, refreshed expression of the whole body when he wakes as the music ceases—all this under the calming strains of this carefully chosen and properly rendered hospital music.

After these observations, do you not agree with Doctor Knopf?

In the ward music, nationality of the patients should be considered. It is not uncommon to find in one ward half a dozen different nationalities, the great majority of them speaking only their own language. Put yourself in the patient's place. You are sick, lonely, discouraged—a Greek song, or a Chinese greets your ear. Does it arouse cheer and hope in you? Are you greatly interested? But let some one play an old-time, familiar song—see how you are stirred—what a different appeal it makes to you. Now, think what it means to the stranger to hear a familiar strain in a language he understands; think how much better he will love America—he soon feels kindly toward the music of America, and this becomes the first step in his Americanization. Thus should every detail of a program brought to a bedside be worked out if it is to function as an aid to medicine.

To voice the opinions expressed by doctors and patients regarding this work would require many, many pages, but I cannot close without a few excerpts from them. In January of this year one hospital superintendent said:

In the hospitals under my jurisdiction I have found nothing that can take the place of music in reducing the mental rebellion that many patients experience from their prolonged hospital confinement.

A superintendent of a large sanatorium recently voluntarily proffered a gift toward the expense of a program, saying:

It is only twenty-four dollars, but you have brought to these patients twenty-four hundred dollars worth of good.

In all the fifteen hospitals to which I take ward music programs for the New York Tuberculosis and Health Association, averaging about six each week, I have the most complete and cheerful coöperation from superintendents and staff, which makes the heavy schedule possible.

The ward and bed patients are most appreciative. The ambulants and attendants who are able to go to the auditorium concerts are equally appreciative for the music taken to them.

As my band of voluntary musicians and I are leaving after a program, we are encountered by our recent audience with "Don't stay away so long again—come tomorrow—we are so happy when you bring us the music."

As one doctor has said:

Anything that makes life more livable is a health-giving agent. Can anything not material give more pleasure than music?

SICKNESS COSTS $2,000,000,000 A YEAR

"Much of the increase in our national wealth has resulted from the added years of life and vigor which are now available to us for productive work because of the better hygienic and sanitary conditions under which we live," writes Dr. Louis I. Dublin, statistician of the Metropolitan Life Insurance Company, in the *Survey Graphic*, in an article entitled Health Work Pays. Doctor Dublin estimates that the cost of sickness in this country in terms of lost production and medical care is not less than two billions of dollars a year. Much of this sickness could be prevented. In fifteen years the Metropolitan Life Insurance Company invested $18,000,000 in a public health campaign for its policy holders; and so saved $35,000,000 in expected payments on policies.

"A balance sheet," Doctor Dublin continues, "would show the enormous disparity between the value of the results achieved by public health work and the cost of the service in the past."

A COÖPERATIVE CLUB AND THE YULETIDE SPIRIT

By Ruth Rives, R.N.

"Now is the high-tide of the year,
And whatever of life hath ebbed away
Comes flooding back," *with the Christmas cheer.*

CHRISTMAS! THAT beautiful word which holds such tender memories and sweet dreams for some of us, such vivid pictures of pathos, poverty and utter hopelessness for others, and for most of us it brings recollections of days that were dear because they entailed some sacrifice, on our part, in order that we might contribute more fully to the happiness of some one else.

What man or woman can ever forget the Christmas days which he spent at home? The sweetest memories of our lives are clustered about the family Christmas tree. The span of life has broadened, and now Christmas for us means "others," but it still means happiness also.

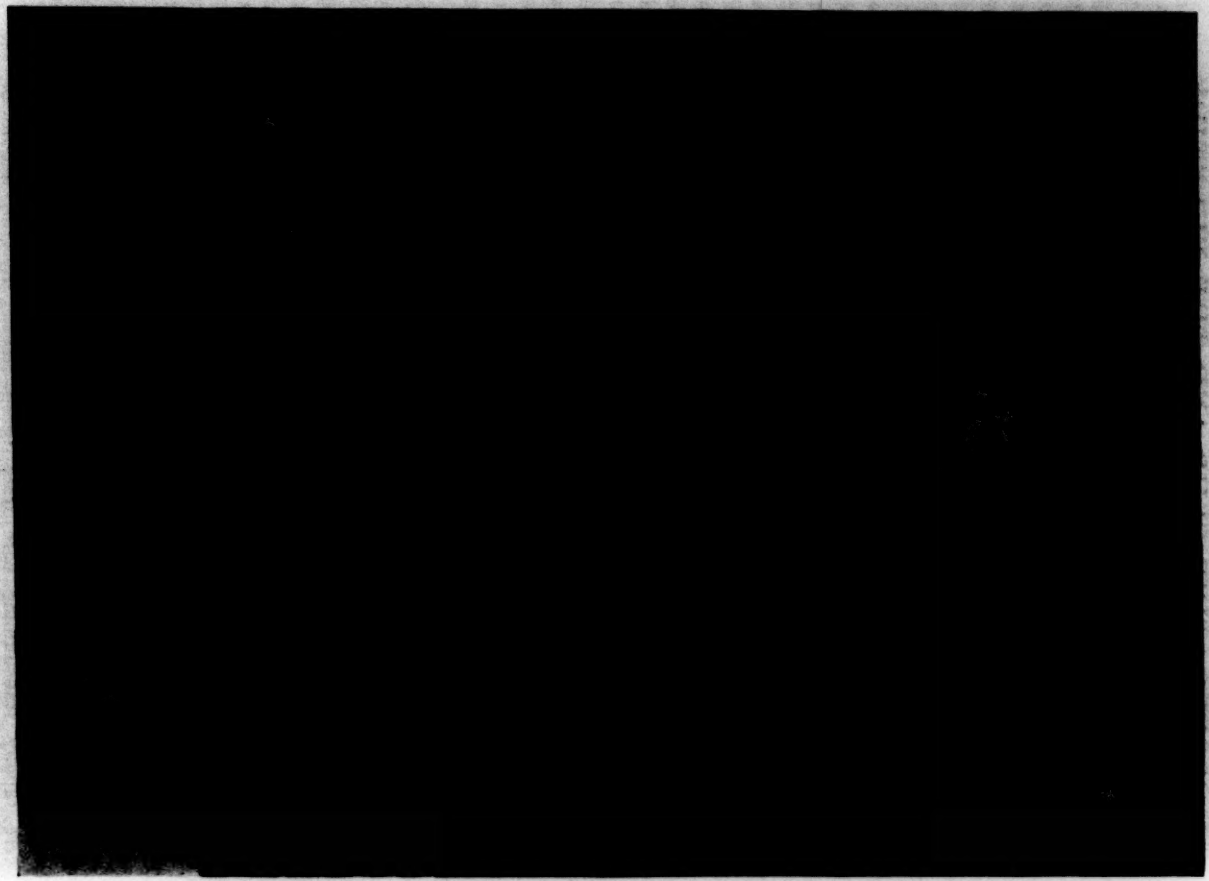
It was the week before Christmas in a large general hospital, where hundreds of patients are cared for. The wards were crowded and the work was unusually heavy. The work was moving along with incredible swiftness and every one seemed alert and happy, but no one seemed to be thinking of Christmas. In one ward a nurse was arranging some flowers on a table near the window. Suddenly she paused in her work, walked over to the window and peered wistfully out into the coming dusk, watching the snowflakes which were rapidly transforming bare trees and a bleak landscape into a veritable fairyland. As she turned away, she wiped a tear from her eyes, for this was her first Yuletide away from the home folks. How could bleak, gray hospital buildings enclosed in bare, gray stone walls encompass anything of happiness and the spirit of Yuletide? How could poor, sick patients appreciate Christmas?

Two days passed in rapid succession, while all of the nurses were chatting gaily about packages from home and Christmas cards. Every one was bubbling over with enthusiasm! The young nurses and probationers, alone, looked solemn and gravely regretful.

Without warning and without disturbing the usual routine in any manner, truck loads of laurel wreaths began to appear, and just as quietly as they appeared, they were most artistically arranged in every ward and every corridor of the hospital.

Christmas Eve dawned clear and cold. Every one seemed to have awakened suddenly, for everywhere folks were working, laughing and talking excitedly. Internes, nurses, attendants and orderlies were tireless figures in the great round of bustle and excitement from which was to evolve the beautiful Christmas for the patients. Each ward vied with the next one in an attempt to have the most artistic display and the most wonderful Christmas tree.

All day long splendid evergreen trees were arriving, bringing with them the fragrance and freshness of the deep, deep forest. By the middle of the afternoon every ward was supplied with its tree, and oh! what joy sprang up in



NURSES' DINING ROOM AT CHRISTMAS, PHILADELPHIA GENERAL HOSPITAL

the hearts of every one in anticipation of trimming a real Christmas tree once again! As unexpectedly as everything else had happened, great boxes of gay-colored trimmings, bright, shiny balls, wreaths and tinsel came up from the Occupational Therapy Shop. The majority of these ornaments had been made by the patients during the long, tedious weeks of convalescence and it was with justifiable pride and a true spirit of admiration that we viewed the result of their handiwork.

All evening and far into the night the nurses worked, placing a basket of holly here, adjusting a wreath there, tying up some gay festoon of evergreen, until it seemed that no place was left uncovered by the forest's fragrant greens. On every bed was placed a sprig of holly tied with a bright, red bow. The stockings were hung on the foot of each bed. Even though they were little more than children themselves, the nurses were tucking aged men and feeble, old ladies into bed and telling them to wait for Santa Claus.

What fun it was to make the children's wards ready for Santa Claus! It was a thousand times more thrilling than to have packages and cards from home! Every child who was old enough to hang his own little stocking up, fastened it to the foot of his crib, and the childish joy and anticipation which brightened those little, eager faces made one wish that Christmas might come every day. Stockings were also hung on the foot of the infants' bassinets.

By seven o'clock, every one said "Good Night" and went away, but at ten o'clock all appeared on the scene simultaneously, and oh! what glorious fun they had filling the stockings and distributing the toys. Little dogs and cats seemed to be yearning for some one to play with them and the little trains and engines were almost irresistable. The work went on joyously and breathlessly, and not one sound broke the silence save an occasional sigh from one of the wee, slumbering patients. When the last orange had been disposed of and the last toy had found its place, the nurses stood back and viewed the scene with great satisfaction. The tall Christmas tree stood in the center of the ward in all its glory, a wealth of toys reposing about the little scene which formed the base of the tree. At the foot of each white crib, in which lay the sleeping children, hung a stocking filled to overflowing with the things that delight a childish heart. Now and then a child would turn and smile in its sleep. Truly the angels were singing, "Peace on earth, good will to men," when they looked down upon this scene. The tired nurses went away without knowing they were tired.

The nurses could not await the coming of the dawn on Christmas Day. At four o'clock in the morning the old, familiar bell pealed forth its Christmas greeting, and they arose immediately with great eagerness. From every corner of every room of the Nurses' Home greetings issued forth. As soon as they were dressed, they assembled in the parlors, where they were greeted by the superintendent of nurses and her assistants. They were divided into groups and went silently to different parts of the hospital to awaken their patients with glad Christmas carols. The morning star was still shining overhead as they started forth. They

walked quietly through the corridors and assembled before the ward doors, and while the patients were still slumbering,—

Holy night, silent night,
All is calm, all is bright.

rose softly and sweetly in the stillness of the morning. When this song was completed,

Joy to the world! The Lord has come!
Let earth receive her king—

was pealed forth in joyous melody. With this, the night nurse turned on the lights in the ward. What joy and happiness it brought to the patients to hear the carols. Here and there a tear was wiped away, but smiles and Christmas greetings soon dispelled these. As the nurses marched away, that old, familiar melody,

It came upon the midnight clear,

floated back to the patients. From ward to ward they sang and at six o'clock the groups assembled about the community Christmas tree in the middle of the court and sang again. After the carols, every one went to one of the various chapels, where the holy communion was observed and the Christmas service was held.

Breakfast was served in the nurses' dining room tastefully decorated with its holly, laurel, and Christmas trees. The only light was afforded by red candles and the centerpiece on each table was a bowl of freshly cut, white narcissus. Their pleasure was divided between the present enjoyment and their eagerness to get to their patients, so they file away one by one.

Happiness reigned supreme on the wards! Santa Claus had remembered every one in some manner and such a wonderful spirit of love and joy and happiness prevailed! Santa Claus had taken the letters from the head nurses, as they had collected them from the patients and had endeavored, with no small degree of success, to fulfill all wishes.

The morning work was finished with amazing alacrity and the nurses devoted their time to the entertainment of their patients wherever it was possible. Who does not know the utter hopelessness of the tuberculous patient and the indifference with which he usually regards most events? Even they were happy.

Could Christmas be made happy for patients suffering with carcinoma? Yes, it could be and most certainly was made beautiful for the patients on the Radiological wards.

No one but a nurse could appreciate the pathos of wards where nervous patients are cared for, and the difficulty with which a spirit of love and interest and joy could be established, but

The Nervous wards truly were rooms of delight,
For old Santa had come in the stillness of night,
And waving his wand lightly over his head,
Left gifts, nuts, and candies on each patient's bed.

Some thought that it was most unfortunate that some of the doctors and nurses were ill on Christmas Day, but whether or not the patients themselves deemed it a misfortune, is a mystery which still remains unsolved.

Perhaps best of all, because Christmas seems to have been made for the children, we come to the children's wards. Here the interne dressed up as "Santa Claus" and played with the children, presenting gifts to each one, telling them stories, and making

Christmas as realistic as possible. Some folks have pitied the children who are in the hospital at Christmas time, but they really do not need to be pitied so much after all. They were as happy as anyone could make them under the circumstances.

The next big event is the serving of the dinner. The trays are covered with gaily decorated Christmas napkins, and set up. Each ward nurse writes out a Christmas card for the individual trays with an original greeting and the patient's name. These are placed on the trays as place-cards. The trays are decorated with fruit and garnished with celery. The hot foods are placed upon the tray when it is ready to be served to the patient, so that it will be most attractive and tempting when served.

The afternoon is devoted entirely to the patients' enjoyment, and wherever possible, special programs are arranged for their entertainment.

Not only on Christmas night are the carols sung, but every night during Christmas week the nurses assemble about the community tree and the court resounds with the full, sweet voices, singing the familiar, old melodies.

Happiness and Others

The nurse, who was so homesick and depressed, has faded into oblivion. She has lost herself in the wonder of that great experience of making others happy. She has found that Christmas means "Happiness and Others."

The thought and interest spent in making Christmas happy for the patients could hardly be surpassed by the elaborate preparations for Christmas for the nurses. Everywhere every one was working for some one else, and while the nurses were devoting their time to their patients and making the day bright for them, others were working for the nurses to make their Yuletide a memorable one.

The parlors were a fragrant forest of evergreen. A beautiful tree stood in the corner of the large lecture hall, resplendent with silver tinsel and icicles, while decorations from the Christmas party graced the walls of the room.

The Christmas dinner was a sumptuous banquet, planned with an artistic appeal which would have satisfied the most exacting. The centerpiece on each table was made of luscious fruit, and as one looked over the room, she could almost fancy that the cornucopia of plenty had been emptied therein. The superintendent sat at her table with her assistants and enjoyed her dinner with her students, beaming gracious smiles upon them from time to time. She seemed to revel in the fact that for the present, at least, she was the mother of all of this group of enthusiastic young women, who were bubbling over with the spirit of Yuletide.

Even that was not all of Christmas for the nurses. It seemed that thousands of packages were arriving and millions of cards and letters. What joy, as they opened the packages from home, filled with "goodies" and beautiful gifts!

Time was when Christmas in the general hospital was not like this—it was the dreaded, depressing day that every one might believe it would be—but through the love and devotion of a great personality to his fellowmen, this change has resulted. Through his efforts was organized a wonderful institution, which

is known as the Coöperative Club. This is an organization made up of various women's clubs of the city of Philadelphia, and it has made possible this joyous Christmas for the patients of the Philadelphia General Hospital. It has placed funds for the purchase of all of these gifts for the patients in the hands of the superintendent of nurses. Different clubs adopt different wards for Christmas and exert every effort to make Christmas a time of joy and good cheer for these unfortunate ones by their untiring personal interest as well as liberal financial aid. They have realized that the personal touch doubles the value of the gift to the recipient.

HOW THE LUTHERAN HOSPITAL CELEBRATED

By Anna M. Holtman, R.N.

AT THE Fort Wayne Lutheran Hospital, the celebration of Christmas was a memorably festive occasion for patients, nurses and employes. Several weeks before the day arrived, telegrams received from Santa Claus were posted on the nurses' bulletin board, first extending his greetings, then telling of the thoughtful preparations he was making for their Christmas, rousing vivid enthusiasm and spirit in the students who were eagerly awaiting the Day. All parcels were kept and put under the huge Christmas tree and on Christmas Eve distributed to the nurses by a real live Santa Claus. The program was opened with greetings by the principal, then a short talk was given by the hospital chaplain, followed by Christmas carols sung by the nurses. The Christmas tree gave of its precious fruit to every nurse; not one had Saint Nick forgotten.

Through the halls of the hospital on Christmas Eve went student nurses, singing carols. A Christmas tree stood in each ward, in the hospital reception room, in the nurses' home.

"On Christmas Day in the morning," the voices of the entire nursing school, seventy-four students, grouped before the hospital, rang out on the cold, frosty air, bringing to the world of suffering within the hospital walls, "good tidings of great joy" to ease them over the holiday spent alone.

After breakfast, each patient was visited by the principal of the training school accompanied by a nurse dressed as Santa Claus. Friends of the hospital had provided gifts for the patients in the children's ward. Holly wreaths made gay the prospect from "The Land of Counterpane," and tiny Christmas trees decorated the patients' trays and every table in nurses' and hospital employes' dining rooms, where the place cards were tiny Santa Clauses.

All convalescent patients had the joy of attending Christmas services held by the chaplain.

Staff and Board members and other friends who had remembered the hospital world had done more than send tangible gifts; borne in with the delightful packages had come a Christmas spirit that impregnated the very atmosphere with peace and joy—a joy that carried on past the training school after-Christmas party, and into the New Year.

CUSHING SIDES (ONE SIDE DROPPED)
As used at the Johns Hopkins Hospital; a humane way of restraining restless patients

YOUR MONEY AND YOUR LIFE FOR ONE WEEK OF PRIVATE DUTY NURSING

"SO MUCH has been said and so little done" about the conditions of private duty, to paraphrase Mark Twain's famous remark about the weather, that it is encouraging to those who have the cause of private duty deeply at heart to find that, at last, the matter is being approached in a truly scientific spirit in at least one section of the country.

We are all familiar with the plaint that "the private duty nurse is charging too much" and "the twelve-hour day works a hardship on the patient" and the counter statements of the nurses, "If we charged less we could not live, for the seasonal nature of the work would starve us out," and "the long hours wear us out." We have been distressed by the bitterness which has crept into some of this discussion and our feelings have been lacerated by the plight of some of the nurses, while every nurse knows the sickness problem of the family of moderate means because she belongs to that economic group herself.

At the meeting of the New York State Nurses' Association the results of small studies made in District One (Buffalo) and District Thirteen (Manhattan) of the State Association were presented. The preparation of the questionnaires and of the final report was the joint work of Janet M. Geister and May Ayres Burgess, Ph.D. Miss Geister, a public health nurse who has done private duty, has had unusual experience in making studies and

surveys of nursing service. Doctor Burgess is an experienced statistician who has made many studies in the fields of public education and health.

Having no axe to grind, Doctor Burgess promptly ruled out all the complicating emotionalism by instituting a search for the actual facts that would make possible a diagnosis of the pathological conditions of which the discussions above indicated are acute symptoms.

Private duty is sick! What is really wrong with it? The studies are far too small to warrant conclusions. They do point the way for larger studies. Much, very much more work must be done before a true diagnosis can be made; but it is important that nurses everywhere should begin thinking of the methods of differential diagnosis which are applicable in the case.

When a correct diagnosis has been made, there will be hope for a remedy and not before. The prescriptions written to date such as, "lower the entrance requirements," "go back to 24-hour duty," etc., are based on symptoms and not on a diagnosis. A correct diagnosis must be based on a large body of *facts*, not on opinions or guesses. Once a diagnosis has been made, a definite plan of treatment may be considered. Although representing one of the largest professional activities in the country, and despite the fact that the private duty nurse renders an essential service, the method of work is clearly most unbusinesslike and disorganized.

How shall the facts be obtained? In the two districts mentioned, the questionnaire method was used. This was prepared with great care and was headed, "Your Money and Your Life—for One Week." This heading was truly descriptive. The economic phase of the problem had prior claim because it seemed most acute. The small unit of time was selected in order to secure accuracy in replies. In order to secure samples that would be as nearly as possible typical of the year it was planned to repeat the study every three months for one year.

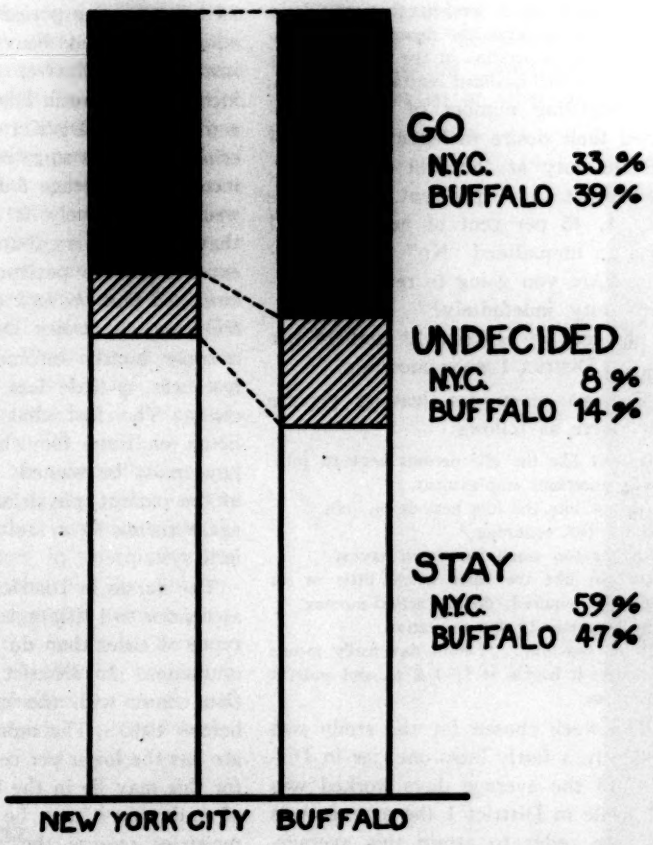
The aid of alumnae associations was sought in sending out the questionnaire, and the quick responses indicated their appreciation of the gravity of the problem. In sending out the questionnaires it was realized that private duty nurses are not accustomed to being interviewed by mail. Even so, the response of 26 per cent of the 1,000 nurses who received the questionnaire in District 13 and of 36 per cent of the 285 who received it in Buffalo, indicate an interest that we believe will approximate 100 per cent if the plan is continued, for it is clear that this is not a prying into personal affairs but a serious effort to gain light upon a grave economic and social problem.

On comparing 352 replies with the total number of private duty nurses in these two districts in the state, it is at once apparent that the study is far too small to be conclusive in any sense. It does however point definitely to certain things:

1. The need for gathering a large mass of material covering experiences of many nurses in every type of locality. The variations in returns from the two districts are a clear indication for this.

2. The method pursued in this study was apparently in the right direction.

3. The pathological condition in private duty is not the fault of any factor in the group concerned, the nurse, the doctor, the



Per cent of 228 nurses in New York City, and of 99 nurses in Buffalo, who intend to remain in private duty, who are undecided, and who plan to go into some other field or occupation. September, 1925

hospital administrator, or the patient. It is due to the system itself, *or the lack of system.*

4. The effort of any one of these factors to place the blame on another is worse than futile since it fills the air with emotions when only a calm consideration of facts can offer hope of solution.

5. Only when each group concerned takes for granted that the individuals of the other groups are, in the main, earnestly interested in the well-being of the patient and that their purposes are decent, can a constructive program be built. Each group has certain members who do not live up to its ideals but on the action of those members, the whole group should not be judged. Let us rather judge each group by the many fine people we know in it!

6. The importance of a strong advisory committee and of sufficient funds and suitable personnel for collecting and tabulating data and for interpreting the facts cannot be

over-stressed. It is evident that any large scale study is primarily dependent on two factors, the coöperation of the worker in the field and a well-qualified central organization.

A startling number of nurses indicated their desire to leave the field of private duty at the first opportunity. In District 13, 33 per cent, and in District 1, 46 per cent of nurses replied with an unqualified "No" to the question, "Are you going to remain in private duty indefinitely?" In addition, 8 per cent in District 13 and 14 per cent in District 1 were uncertain.

Reasons given for leaving private duty were as follows:

Do not like the idle periods between jobs. The uncertain employment.
Do not like the idle periods *on* jobs.
Work too confining.
Income too small to permit saving.
Do not like the cases where little or no nursing is required; do like actual nursing.
No opportunity for recreation.
Hours too long. 12-hour day really means 15 hours; it begins at 5:30 a. m. and ends at 8:30 p. m.

The week chosen for the study was evidently a fairly busy one, for in District 13 the average days worked was 5.1 while in District 1 the average was 5.6. In order to attain this average, however, in District 13, 125 nurses had to work a full 7-day week, while 32 did no work at all, and 44 others had 4 days or less. Some in this latter group were idle by choice or in order to rest between cases; but the inequality in distribution of work is here illustrated even in the short period of time. In District 1, the loss of nurses' time through no work was slightly less.

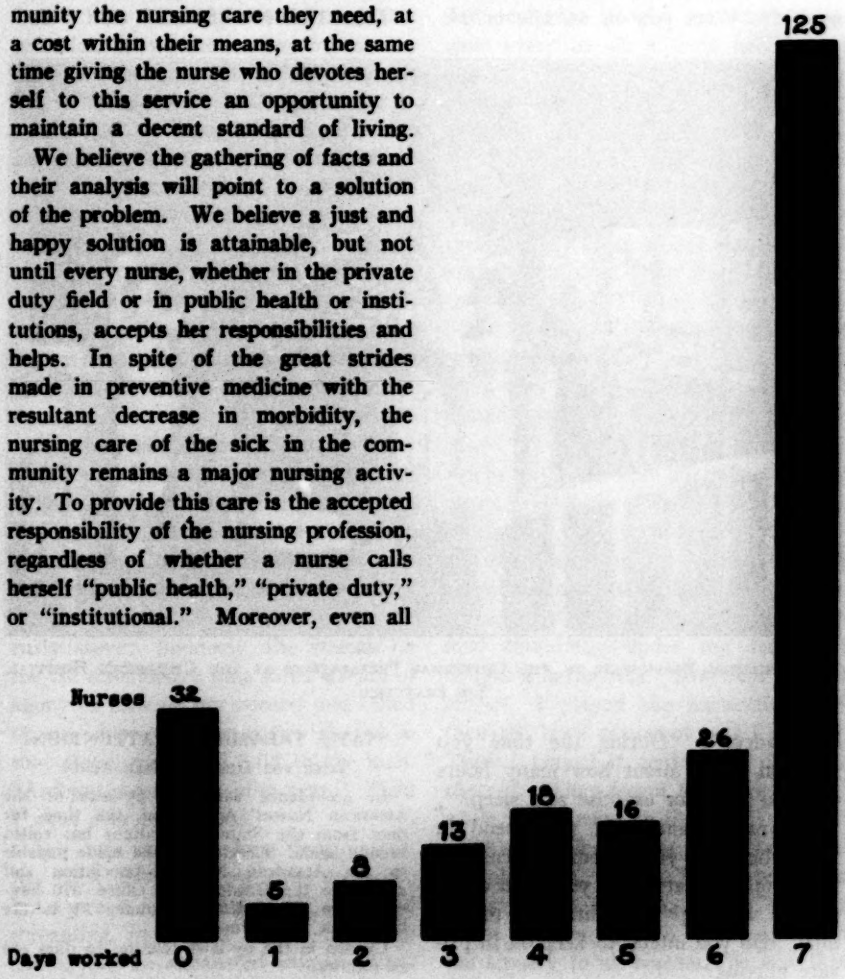
The average rate per day in District 13 was $6 per day, while in District 1 the rate was $5 per day. The cost to the patient requiring two nurses, each 24 hours, over a period of one week is, without question, heavy, and in many instances prohibitive, yet the average income per nurse in District 13 was $33 a week and in District 1, $29. Considering that these sums represent average incomes for average 5-day and 5½-day weeks, respectively, it is not indicated that the nurse is gaining wealth at the expense of the patient. *Rather it is indicated that the lack of system in distribution of service is at fault.* The average hourly income was, in both instances, a little less than forty-nine cents. The fact that some of these hours on duty for which the patient pays must be wasted, is not the fault of the patient, physician, or nurse, but again points to a faulty and unorganized system.

The nurses in District 13 who graduated prior to 1900, register against more types of cases than do the more recent graduates. In District 1, this distinction comes with the nurse graduating before 1910. The more recent graduate has the lower per cent. The reason for this may lie in the broader training of to-day or it may be because certain registries require the newer graduates to take all types of cases, or it may be due to a number of other reasons. It is suggested that on future questionnaires the nurses be asked to give their reasons for registering against certain types of work. The average nurse in both districts registered against 1.8 types of cases.

The study indicates, even with the limited amount of material at hand, that conditions in the field of private duty nursing are such that the nurse is restless and dissatisfied—that patient and nurse alike share the high cost of unor-

ganized and unsystematic distribution of service—that there exists a great need for an immediate intensive and intelligent consideration of the situation in order to insure the sick in the community the nursing care they need, at a cost within their means, at the same time giving the nurse who devotes herself to this service an opportunity to maintain a decent standard of living.

We believe the gathering of facts and their analysis will point to a solution of the problem. We believe a just and happy solution is attainable, but not until every nurse, whether in the private duty field or in public health or institutions, accepts her responsibilities and helps. In spite of the great strides made in preventive medicine with the resultant decrease in morbidity, the nursing care of the sick in the community remains a major nursing activity. To provide this care is the accepted responsibility of the nursing profession, regardless of whether a nurse calls herself "public health," "private duty," or "institutional." Moreover, even all the nurses combined cannot work out the problems by themselves. The doctor, the hospital administrator, the patient, potential or otherwise, are all



Of 243 private duty nurses in New York City, during one week in September, 1925, 32 did not work at all, 125 worked every day, and the remaining 86 nurses worked part of the week. The "average nurse" worked five days.

deeply concerned with this problem. We need their help.

Some of the questions asked in addition to those indicated above were: "How many calls did you refuse last week?"; "Were you on 8-, 12-, or 24-hour duty?"; "During the time you were on duty, about how many hours did you have for exercise and sleep?"; "How many hours did you spend in travel between your room and case?"; "How many years have you been doing private nursing?"; leading up to the final, "Do you intend to keep on in private nursing?"

The individual replies are replete with interest, they are frank and remarkably free from animus. They indicate very clearly that the majority of the nurses replying—

Do not like the long hours.
Do not like the idle periods between cases.
Do not like the idle periods *on* cases.
Do not earn enough money to permit saving.

DO LIKE NURSING.

THE CHILDREN PARTICIPATE IN THE CHRISTMAS PREPARATIONS AT THE CHILDREN'S HOSPITAL, SAN FRANCISCO

STATE TREASURERS ATTENTION!

TIME FOR DUES IS HERE AGAIN

In accordance with the by-laws of the American Nurses' Association, the time for dues from the State Associations has rolled around again. Checks may be made payable to the American Nurses' Association and mailed to the Headquarters Office, 370 Seventh Ave., New York. January 31 is the time limit for payment.

Clauses in the by-laws relating to dues are as follows:

"The annual dues from each state association shall be 50 cents per capita.

"All dues shall be paid in advance not later than January 31 for the current calendar year.

"Each state association shall pay dues on the basis of membership the first day of December."

CHRISTMAS REVERIES

By Helen Dore Boylston, R.N.

I HAD THOUGHT I was finished with nursing, and here among the Ozark hills it surely seemed so. But last night as we sat reading by the fire there came a frantic knocking at the door. Before we had time to speak it opened and a man stumbled in. He stood blinking in the firelight for an instant, twisting a ragged hat brim with shaking fingers. Then he spoke, hoarsely:

"My wife's havin' a baby an' I cain't git no one to come! Thar's women here, an' I thought—I—I'm afeared she's dyin'! Fer God sake, won't someone come?" I stood up. "I'll come," I said.

The hill cabin stood bleak and lonely under the December moon, the bitter wind whistling through the chinks in the logs. As we pushed open the door a low moan came from a cot in a corner of the one room. There was no other furniture in the house, no fire in the rusty stove. Suddenly, the woman on the cot screamed, a long shrill scream of agony. I took off my sweater and rolled up my sleeves. "Get a fire started in that stove, quick!" I said to the man. "And put some water on to heat." Then I went over to the bed.

It's over now, the long weary night. My back aches and my arms are lame, but there is a new girl child, oiled and screaming, in a quilt in the little hill cabin, and an exhausted woman sleeping peacefully on the cot. I am very tired and very well pleased with myself.

How gray the sky is, and cold. It was so my last Christmas in France, only the sun came out for a little while in the afternoon, that day. I remember the frightful time we had trying to find evergreen to trim the wards. We stole every bit of it from neighboring estates. But the wards were charming when it was done,—and the boys worked so hard to help. Afterward I let them all off to go down to the village. It was against rules, and I knew they would all get drunk. But I knew, too, that their homesickness would vanish and I immorally slipped a few francs into each coat pocket as it went by me at the door. I said nothing and they said nothing, pretending not to see, but there was an undercurrent of mutual comprehension which nobody failed to get.

The boys who were left in bed wanted music. How they wanted it! Christmas wasn't Christmas without music,—and my ward had no gramophone! I remember how, at last, in desperation, I ran down to the canteen, the frozen mud crumbling under my feet, and bought a harmonica. And *then* we had music! I played the harmonica, and then the boys played it and I danced. Then I played it again, and the boys cheered. They forgot home for a little, while I was being an idiot.

This cold sky brings it all back. All the old days. * * * There was a Christmas in Poland, too. Christmas in the dispensary, with dinner served in the nursery to all comers. It was that very morning that we found Vika, huddled beside her dying husband on the floor of a tenement basement, trying to keep him alive with the warmth of her body, trying to feed a frantic baby from

her flat dry breasts. We moved them all over to the dispensary that very day —Christmas morning—and had the satisfaction of putting the husband into a clean, warm bed, and of seeing the quavering but competent Vika washing babies, including her own, in the nursery. She had a job at last, after weary months of searching. And it came to her on Christmas Day.

And I remember, long ago, a Christmas Eve in Boston. All my world consisted of one big hospital, then. I had been sick, but I was allowed out in a wheel chair to listen to Doctor Cabot's carol singers. It was snowing, one of those soft, windless snow storms, and the singers, grouped in front of the Bulfinch Building, were just a dark blob in the dusk. They were singing "Silent Night, Holy Night," and as I sat there, listening, the corridor door behind me opened with characteristic abruptness, and the woman who had been my instructor in Practical Nursing came out into the snow.

I had realized vaguely what she meant to the nursing profession. I knew that for many years she had struggled to drive into the heads of romantic youngsters all the ideals and traditions of our school. I was scared to death of her, and so was everybody else. But now, standing there by the old gray walls of the hospital she loved, with the stern lines of her mouth softening as she listened, her kind eyes hidden by the darkness, and they were kind, as I knew from past experience,—with the snow sifting down over her hair and cap and stiff white uniform, very suddenly she became, for me, the spirit of nursing itself. All her life, and mind, and heart had been given to her teaching, without recognition,—beyond, perhaps, her own school. And she wanted no recognition. All she wanted was that her raw youngsters should go out into the world to give of themselves and their young strength. And to give themselves efficiently and well. In that moment of understanding I saw her as she is,—one of the world's great women.

I have not lived up to her standards, but I have done the best I could. And it is good to know that I am one of the thousands of women scattered over the world, from the Ozarks to China, to whom she has taught her ideal of service. If some of us are not big enough to live up to it, we have at least helped a *little* to pass it on. So, though I am not satisfied, I am content.

A NOTABLE MAGAZINE

Last November the amazingly high quality of the Heart Number of *Survey Graphic* actually startled social and health workers into an appreciation of "Hearts" as well as of *Survey Graphic*. The City Health Number, issued this November, is equally fine. Dr. Haven Emerson writes of "The Robust City;" Dr. Louis Dublin states that the million dollars a year paid for health work by the Metropolitan Life Insurance Company pays 200 per cent. His graphs of the descending curve of deaths of children of pre-school age are powerful arguments. Among the "Guardians of the City Health," we find *the nurse* of whom Katharine Tucker writes:

"So we see the nurse emerging, very much a part of the social and health program for any city. Those in the public health nursing movement are alternately stimulated by the task and aghast at its magnitude, realizing fully the dangers of such rapid development, yet tremendously inspired by the opportunities. Every public health nurse needs the attitude of mind of a student—there is so much to learn, so much progress to be made, so much that is in process of change. Possibly the essential soundness in the progress of the public health nurse is that she is part of a goodly and helpful company of social workers, doctors, and laymen, all working together with an increasing sense of the unity of their purpose—a socially, mentally and physically healthy community."

This number of *The Graphic* will also be a valuable addition to the reference material of instructors and supervisors.

EDITORIALS

Christmas Lists

"Nobody ain't Christmas shoppin'
Fur his stockin'.
* * *
He ain't quar'lin', recollec',
He don't spec'
Nuthin'—It's his not expectin'
Makes his mammy wish—O Laws!
Fur de 'nigger' Santy Claus—."

PROBABLY NOT many nurses have seen these little verses "Crowded Out", but thousands of them are busily making up Christmas lists in the hope that there will be fewer wistful children and fewer lonely grown-ups crowded out this year than last.

There is something intriguing about the very thought of nurses' Christmas lists. It is a season when one might fairly envy the visiting nurses, so many opportunities do they have for bringing Christmas joy, and the stories of Christmas in hospitals in this number of the *Journal* are full of plans all based on carefully thought-out Christmas lists. What a wealth of affectionate thought goes into the compilation, what enthusiastic giving among the fortunate is enlisted in the effort to make the less fortunate happy at Christmas time.

Perhaps the most careful planning of all is done by nurses working in remote places, nurses who will set out with well filled saddle-bags to go "Christmasing" up and down the creek beds of the Kentucky mountains or cruising about the country side in well-stocked Fords.

It isn't so easy to stay in an office at Christmastide until we remember that the editors, lucky folk, have the biggest Christmas list of all. For there in the files is our Christmas list! Thousands upon thousands of nurses! Nurses whose fine service brings us joy, for they share their experiences with us. Nurses at home and nurses abroad. Nurses we've never seen. Nurses we've met in many places. Nurses of many lands with whom we share the glowing memories of Helsingfors. To them all we send the Christmas *Journal* freighted with our Yuletide greetings—greetings which are a compound of pride, affection, and of aspiration. May the season of Good Will bring happiness to each and every one.

The Grading Committee and Its Work

LAST MARCH there was held in New York City a Conference on the Grading of Nursing Schools, reported in the *Journal* for April, out of which has come a permanent Committee on Grading. As stated in Miss Logan's article in this *Journal*, this Committee is composed of fourteen persons, two representatives from each of the national nursing organizations, one each from the American Medical Association, the American Hospital Association, the American College of Surgeons, and the American Public Health Association; and in addition four persons who represent the field of education and the public.

This Committee, with twelve of its members present, met on November fourth and completed its organization by electing as its chairman, Dr. William Darrach, the representative of the American Medical Association. The purpose of the grading program is stated to be that of bringing

about progressive improvement of schools of nursing not only as educational institutions but as institutions for the care of the sick and the promotion of health in the community. Doctor Darrach, in speaking for the Committee, stated also that the importance of maintaining an adequate supply of nurses will not be overlooked in any program it may undertake. Beyond this point the policies of the Committee are still unformulated and therefore no authoritative information as to the standards to be set up is as yet available.

The attitude of the Committee is so genuinely sympathetic to the schools and the institutions with which they are affiliated that those who have looked upon the very suggestion of grading with fear or disfavor should disabuse their minds of a false conception. It is not the purpose of the Committee to legislate out of existence schools that for one reason or another do not seem to meet generally accepted standards, there will be no high-handed "Off with their heads." The whole purpose of the program is that of helping the schools to work out their own problems in achieving a status which will be accepted throughout the country.

The Committee is now engaged in finding persons with just the right combination of scientific training and professional knowledge to carry on the work. Every person concerned, and that is or should be, every person with any connection whatever with nursing and health work, will rejoice in the admirable temper and coöperative spirit in which this epochal piece of work is undertaken.

The eagerness with which this work was discussed in and out of meetings during the American Hospital Association Convention at Louisville is an index of its importance. It is absolutely the most important matter before nursing and its allied groups today. Those who approach it with open minds have already taken a long step toward a national grading of schools of nursing. It is a plan that offers nation-wide recognition of the good that is in them to all those schools that are sincerely striving to meet their obligations and that offers sound and constructive assistance on the forward march.

"The I. C. N."

IN JANUARY an extremely important publication—the official magazine of the International Council of Nurses—will make its bow to the world. Its name, "The I. C. N.", will enshrine the symbol that shone out in radiant blue and silver at the meetings in Helsingfors. It will be owned, edited and managed by the Association. It will be published in English and will include articles from the various fields of nursing from qualified persons all over the world. It will carry news of nurses and of nursing from the five continents and promises to become a dynamic force in our professional development.

The editor is in a position to tap the nursing resources of the world. Success now depends only on the readiness of the nurses of the world to subscribe. Subscription rates for this Quarterly are only one dollar per year, an investment which promises large returns in inspiration, stimulation, and ever-widening knowledge.

In days to come it will be counted an honor to have been an initial subscriber to this important publication, for we

know with what pride many American nurses speak of their twenty-five years' support of our own journal. Faith in the work of the International Council of Nurses cannot be better expressed than by checks sent at once to Christiane Reimann, 1 Place du Lac, Geneva, Switzerland.

The American Journal of Nursing gladly pledges "The I. C. N." all the professional support and coöperation within its power. The *Journal* believes that many of its readers are prepared to do likewise and thus to assist in developing a magazine in every sense worthy of the exalted purposes of the International Council of Nurses.

The Middle Atlantic Meeting

THE NEW Division of the American Nurses' Association, the Middle Atlantic, will meet at the Washington Hotel, Washington, D. C., on the third and fourth of December. This will bring together for the first time for conference on kindred problems and for the enjoyment of an unusually rich program, the nurses from the member states, Delaware, the District of Columbia, Maryland, New Jersey, New York, and Pennsylvania. Clara D. Noyes, Annie W. Goodrich, Isabel M. Stewart, Adda Eldredge, and Harriet Bailey are among the nurse speakers, while medicine and public health will be represented with equal distinction by Grace Abbott, Dr. Hugh S. Cummings, Dr. Loren B. Johnson, Dr. Wm. A. White and Dr. Haven Emerson. Round tables on very practical problems in nursing are planned. The social features include a mid-day reception at the White House, a tea given by the Graduate Nurse Association of the District at the National Red Cross Headquarters, and a banquet at the Hotel Washington.

A Distinguished Guest

MANY NURSES eminent in other lands and honored in this, have visited our shores in the last few years. But the visit of Miss A. Lloyd Still, made possible by the Rockefeller Foundation, has brought a very particular thrill.

In her hands has been placed the guardianship of the shrine of modern nursing, for Miss Lloyd Still is Matron of the Florence Nightingale School of Nursing at St. Thomas Hospital, London, England. The imposing front of St. Thomas lies stretched along the Thames, opposite Westminster. It stands before the world as the home of a great idea. Those who have visited that shrine, that Mecca, in somewhat the spirit of those who make pious pilgrimage to sacred spots, know that Miss Lloyd Still appreciates to the full her responsibility for maintaining the school in a manner that honors its founder and that offers a welcome to all the world, for says Miss Lloyd Still "the school which Miss Nightingale established is not for us alone but for you all—for nurses everywhere." Her cherishing care of the tangible mementoes of Miss Nightingale's great service, of the gown worn back to England from the Crimea, and of other personal belongings, as well as of the infinitely precious manuscripts and letters, is but an exemplification of her feeling of grave but affectionate responsibility for the preservation of the great tradition, the living social force of the school over which she now presides.

Miss Lloyd Still expressed great

admiration for our accomplishments but was chary of comparison between nursing in America and in England, although she frequently remarked that "You are very young and you go very fast in America, while we are old and slow and must be very sure of where we are going." One outstanding difference she commented upon freely was that of the status of head nurses. Our constant shifting of personnel would naturally astonish one who is accustomed to a system that retains "ward sisters" in those positions of honor for periods of many years.

Miss Lloyd Still discussed freely the development of the College of Nursing, Ltd., an organization of English nurses now numbering 24,000, which is exercising a profound influence on professional thought and education in its own country. In parting, she spoke of "the extraordinary kindliness and courtesy" extended to her throughout her travels, quite modestly failing to realize that 'twas but a reflection of the spirit in which nurse "pilgrims" are received at St. Thomas.

There is striking similarity on one point, at least, in the thinking of Florence Nightingale and the moving spirits of the Rockefeller Foundation. Miss Nightingale knew that a school of nursing requires funds and so endowed the first modern school of nursing in the world. The Foundation is demonstrating its belief by its support of the Yale School and of that at Vanderbilt University and is helping to bring about a generous sharing of opinion by fostering such journeyings and observations as those of Miss Lloyd Still. May she return to her labors as stimulated by her contact with us as we have been by her visit.

The 1926 Calendar

"I SING THE song of the nurse!" Thus begins "The Nurse" by Cornelia James Cannon. This is only one of the poems, all singing the song of the nurse, gathered together from many sources by the Publications Committee of the National League of Nursing Education for the delectable 1926 Calendar.

Quite unlike anything we have had before is this Calendar. Many of the poems are already well known and loved by nurses. All deserve a place in our interest and affections. It is an artistic production possessing real distinction of form and content. It is a gift of gifts for nurses who wish to send "something a little more than a card," to friends without the profession or to distant friends within it.

As the *Journal* goes to press, the Calendar sale is in full swing. The Executive Secretary of the League rejoices over the splendid orders coming in from some of the states. She remarks hopefully on the good work done in others in previous years. Early in December, all will have fallen into line and the thousands of calendars will be on the way to those who are using them as remembrances. It should not be forgotten that the Calendar fulfills a double purpose. It is a charming gift. It is an extremely important item in the budget of the National League of Nursing Education. A really large calendar sale means enlarged League activities. Surely there are no more important activities within the profession. Have you placed *your* order yet?

WHO'S WHO IN THE NURSING WORLD

LIII. ANNE LYON HANSEN

BIRTHPLACE: Leeds, England. PARENTAGE: English and Scotch. PRELIMINARY EDUCATION: English private schools. PROFESSIONAL EDUCATION: Graduate of Buffalo Children's Hospital Training School, Buffalo, N. Y. POSTGRADUATE WORK: Eighteen months, Buffalo General Hospital. POSITIONS HELD: Staff nurse, Buffalo District Nursing Association; Domestic educator, staff, and finally charge, in employ of North American Civic League for Immigrants; District Secretary, Charity Organization Society of Buffalo; Superintendent District Nursing Association of Buffalo, nine years. AUTHOR OF: Several articles for *American Journal of Nursing*, *Public Health Nurse* and others. OFFICES HELD: President Alumnae Association, one year; President District No. 1, four years; President New York State Organization Public Health Nursing, four years; President New York State Nurses' Association, three years. ADDRESS: 181 Franklin Street, Buffalo, N. Y.

MIDWIFERY IN KENTUCKY

On May 28, the Kentucky Committee for Mothers and Babies was organized. Mrs. Mary Breckinridge, who has had special training in midwifery in England, outlined the work to be undertaken and said that it would be carried forward from special nursing centers where each nurse-midwife would give midwifery, nursing and public health care to an area no larger than she could handle well on horseback with not more than fifteen hundred people. Stress would be laid on the prenatal period, the care in childbirth and after-care of mother and baby, and the further needs of the young child—treating the other phases of public health nursing as valuable but secondary aspects of the work. She said that the nurses chosen would need to have, in addition to their general hospital and public health training, a few months of special preparation as midwives, similar to that given in England.

Mrs. Breckinridge said further that a mountain county had been selected for this initial demonstration, not because the problem was peculiar to the mountains, but for the following reasons:

1. The mountains present an intensification of the problem and it was more sporting to begin there.

2. The native population in the mountains had a very high average of ability and was of the greatest possible value to the nation. * * *

3. The picturesque appeal of the mountains would draw a more ready response in getting the work under way.

Among the resolutions adopted were:

1. That its purpose is to safeguard the lives and health of mothers and young children by providing trained nurse-midwives for rural areas where there are no resident physicians.

2. That the nurse-midwives shall work under supervision; in compliance with the Regulations for Midwives of the State Board of Health, and the law governing the Registration of Nurses in Kentucky; and in coöperation with the nearest medical service.

3. That the value of this service shall be demonstrated first in a given county, * * *.

4. That accurate records shall be kept, and the work begun with a survey in coöperation with the State Board of Health, * * *.

—*Quarterly Bulletin* of the Kentucky Committee for Mothers and Babies, June, 1925.

OUR CONTRIBUTORS

"The Christmas Spirit" was written by **Lillian M. Koudelka, R.N.,** (Wesley Memorial School of Nursing, 1924) while affiliating with the Illinois State School of Psychiatric Nursing.

Even at the risk of seeming ungracious at Christmas time, we are publishing the second of **Mrs. Salisbury's** articles on Budgets for the sake of those who may make a new start toward true economic independence on the first of the year.

Anna M. Holtman, R.N., is Superintendent of the Lutheran Hospital, Fort Wayne, which is notable for the fine spirit of its personnel.

Helen Dore Boylston, R.N., as "Christmas Reveries" shows, has practised her profession in many places. She is a graduate of the Massachusetts General Hospital, Boston. A series of extremely interesting articles from her pen have recently appeared in the *Atlantic Monthly*.

Isa Maud Ilsen was formerly Director of Hospital Music in War Department C. T. C. A., Washington, D. C., and Director of Music in Red Cross Reconstruction Hospitals. She is now Associate Secretary Hospital Service, New York Tuberculosis and Health Association.

Ruth Rives, R.N., who writes so feelingly of Christmas in a General Hospital, is a graduate of the Philadelphia General Hospital School of Nursing and an Assistant Instructor at her Alma Mater.

DEPARTMENT OF NURSING EDUCATION

LAURA R. LOGAN, R.N., DEPARTMENT EDITOR

A PROGRAM FOR THE GRADING OF SCHOOLS OF NURSING

BY LAURA R. LOGAN, R.N.

[The following paper was read before the Nursing Section of the annual meeting of the American Hospital Association, held in Louisville, Ky., October 21, 1925. The writer wishes to call attention, at this point, to the fact that it is an expression of personal opinion, not an official statement from the Grading Committee which has as yet not determined upon its grading scheme.]

GRADING OF Schools of Nursing. It sounds at first hand like a rather difficult, wearisome, discouraging, though essential piece of work; certainly one capable of precipitating many tribulations and presenting infinite problems. Doesn't it? We who are here tonight are all interested in it, as it is so likely to affect vitally the success and happiness of our individual hospital and school affairs. Any such plan concerns us properly and challenges our critical attention. The Grading of Schools of Nursing. Of course it is a momentous and serious undertaking. It could easily prove also a dangerous one to the best interests of all concerned. But it need not be dangerous to anyone who has only as his ultimate desire to give all patients everywhere at all times the best possible nursing care and to aid best in the prevention of disease.

Indeed, the more one contemplates the possibilities and ramifications of a grading program for schools of nursing, the more one studies allied undertakings, and the methods of one of them more particularly, the nearer one comes into the presence of a movement, of which the grading of schools of nursing may become an important part if we go about it rightly, which is the most stupendous, the most simple, the most sure and effective and the most inspiring of any other single movement for human betterment in the complex social order of our day.

With the coming into existence of so many diverse and variously conducted programs of grading in other fields, high school, university, medical college, hospital, etc., it was natural that the idea of grading schools of nursing should also be thought of. In 1911 at the annual meeting of the National League of Nursing Education (which organization has always studied every means of advancing and improving nursing education), the idea of grading was first brought up for serious consideration, suggested more immediately by the grading of schools of medicine then in progress by the Carnegie Foundation. Indeed, the Carnegie Foundation was approached for aid in financing such a plan, but it could not be secured.

As time has gone on, there have been periods of greater clarity and periods of greater confusion as to just what might be done by grading of schools of nursing and the best way to do it. We watched the method of classification applied to medical schools into A, B and C grades with considerable interest and we followed the minimum standard of the American College of Surgeons in the standardization of hospitals with even keener interest. One thing is evident

that the term "grading" demands elucidation. It is not in itself self-explanatory either of the goal to be reached, the object in seeking it, the relative merits of any one of a dozen or more ways of carrying out any particular scheme or of being assured of its acceptance and the maintenance of standards after their establishment. Grading need not mean a static or arbitrary or unyielding pattern to be imitated. It can mean rather just a basic standard offered from which a school's progress may start on a course of steady self-development. It need not mean coercion or criticism, but purely a spirit of helpfulness. Indeed, the success of any plan chosen will depend upon the niceness of one's judgment as to the best ways and means of getting it generally accepted and maintained.

A standard curriculum for schools of nursing was outlined by the Committee on Education of the National League of Nursing Education. It was published in 1918 and was made available to schools of nursing at cost; through State Leagues of Nursing Education and State Boards of Nurse Examiners the schools were urged to study and introduce it. Its use has been very gratifying.

Study by a special committee of the League of the value and definition of a plan of grading was interrupted to await the report of the Study of Nursing Education by the Rockefeller Committee begun in 1919 and published in 1923. The Rockefeller Committee carried out satisfactorily its object,

to survey the entire field occupied by the nurse, to form a conception of the tasks to be performed and the qualifications necessary for their execution and on the basis of such a study of function to establish minimum educational standards for each type of nursing service for which there appears to be a vital social need.

A tentative budget amounting to approximately $115,000 for a three-year program of grading was estimated by the League. The beginning of the work is made possible through the gift of $10,000 from the three national nursing organizations themselves, and through the pledge of Mrs. Chester C. Bolton to underwrite the plan for $15,000 for its first year of work and to give further assistance if necessary. A number of alumnae associations also have pledged. As yet none of the great foundations approached have agreed to contribute to the plan.

The League's intention to formulate and put into action a scheme for grading or standardizing schools of nursing has been endorsed by the following organizations and since a joint conference, held March 4, 1925, a general committee on grading has been formed constituted by delegates appointed by these organizations as follows:

The National League of Nursing Education, two delegates—Elizabeth Burgess and Laura R. Logan.

The American Nurses' Association, two delegates—Susan Francis and Helen Wood.

The National Organization for Public Health Nursing, two delegates—Gertrude Hodgman and Katherine Tucker.

The American Medical Association, one delegate—William Darrach, M.D., and alternate, Winford Smith, M.D.

The American Hospital Association, one delegate—S. S. Goldwater, M.D., and alternate, William H. Welch, M.D.

The American College of Surgeons,

one delegate—Malcolm MacEachern, M.D., and alternate, Allen Craig, M.D.

The American Public Health Association, one delegate—C. E. A. Winslow, M.D., and alternate, Lee K. Frankel.

This Committee has appointed, in addition, four representatives from the field of university education and the public: Chancellor Capen of the University of Buffalo, Dean Fitzpatrick of the Graduate School of Marquette University, President Suzzalo of the University of Washington, Mrs. Chester C. Bolton of Cleveland. Pending the appointment of a permanent chairman, Isabel M. Stewart, Chairman of the original League committee on grading, is acting as temporary chairman and secretary.

There has been as yet but little opportunity for discussion by this committee of the policies and the nature of the grading program to be set in motion. The grading committee has not definitely determined its plan of action nor what type of grading it will undertake. Shall we set out to create primarily a list of accredited schools that conform to some definite more or less fixed standard, say that of the average good school of today, let time bring what it will? That seems to me too static. Shall we set out to seek more uniformity and better standards among our schools of nursing? This is sought in all other educational groups. It would therefore seem desirable for us, too. Nor need we mean by such standardization only the uniform mediocrity but covet rather the *formulation of a basic method of organization and equipment, the minimum without which it would not be safe to have a school of nursing at all.* A basic method of organization and equipment from which a school can start on a course of steady self-development and which, whenever established, would beyond all peradventure involve that school in spontaneous and continuous growth from within.

The question of grading into three classes, A, B and C, as medical schools were graded, was referred to as a possible plan in a partially attended preliminary meeting of our general committee. Such a procedure would afford a list of schools which would indicate to prospective students which were excellent, good, and fair, or good, fair, and poor, depending upon how high a program of nursing education should be chosen as average. The value of such a list would depend upon how many schools were graded or could reach the grade. This brings the question of whether we should be welcomed by enough schools, as inspectors and graders, never a very welcome group in any institution, to make the list worth while.

Chancellor Capen stated,

I think the schemes for grading that have a number of grades that are all above the minimum for approval is an exceedingly difficult scheme to administer and you never get satisfaction among the victims. It may be that dissatisfaction is worth securing in some instances. No doubt this is so, but I do not confess for myself that it is. I have never admitted that the American Medical Association didn't make a mistake in having three classes of schools above the condemnation. It would have been far better to have had one grade.

Doctor Gies, who is engaged to classify dental schools, under the Carnegie Foundation and who spoke for the grading of dental schools, said,

A classification into merely acceptable or

non-acceptable would be more desirable than A, B and C method.

He called attention to the fact that there is a more liberal attitude developing and criteria are now applied broadly and sympathetically rather than narrowly and arbitrarily.

As over against the more arbitrary A, B, C type of grading stands that of the minimum hospital standard of the American College of Surgeons' program. When that organization came to the realization that they must shoulder the responsibility of furnishing a definite standard to hospitals, Dr. Franklin Martin states that the question as to whether it should specify the maximum or minimum requirements arose. They decided, after careful consideration that the plan would be more workable and they could accomplish more by a minimum standard which would contain the fundamental requirements essential to every institution for the care of the sick rather than a maximum which would necessarily be burdened with unessential detail.

He gives credit to Dr. John Bresnahan, a practical hospital expert on their staff, for advice in this matter. Doctor MacEachern and Doctor Craig, the representatives of this organization on our committee, are the men who are carrying out its program. They are convinced that it will be a mistake to begin any grading scheme of nursing schools in terms of A, B and C classification. They have found, after making over 10,000 individual surveys of hospitals, that the policy of a minimum standard is much easier to put into action and has led to results far in excess of anyone's expectation. It has stimulated universally a quickened desire on the part of a large per cent of hospitals in the United States and Canada not merely to be on the accredited list, but to keep steadily improving upward often far beyond any maximum standard that might fairly have been represented in a grade of A. It is interesting to learn that the governments of Australia and New Zealand have asked Doctor MacEachern to visit these two countries during the year in order that their hospitals may be placed on a similar basis. I personally believe their method holds the greatest promise of success in our grading of schools and do not believe it advisable to undertake an A, B and C classification.

The question of a job analysis, so called, was incidentally raised during the preliminary conference on grading schools of nursing and has occupied considerable attention since then. Miss Stewart addressed a letter to members of the committee and a miscellaneous group of individuals and personnel organizations asking for an opinion regarding the necessity of an analysis of nursing functions to a grading program of schools. Nearly all felt an analysis of functions was essential. It is, of course, evident that the satisfactory formulation of a grading scheme presupposes a thorough working knowledge of the functions of the group to be graded. But considerable confusion has arisen regarding the necessity of a special job analysis at this time because those addressed were so variously informed regarding the adequacy of such analyses already in existence, such as the Rockefeller Report, the Lovitt Report, the files of the League, etc. Moreover, the character and experience of the members of the general committee on grading were unknown to them and the fact that its membership is already

in possession of this very considerable mass of data as well as its own first hand knowledge on the subject. A job analysis could hardly hope to add materially to the knowledge we now possess. The trouble is we already have too many details of function to summarize. Abraham Flexner says in his discussion of a curriculum for the medical student,

> No two persons would ever agree on the particular set of facts and skills which the practitioner needs to master.

Doctor MacEachern's experience leads him to believe that no job analysis further than those which have already been made should be undertaken and that little time should be lost or expense incurred in reaching a working analysis of nursing functions. I feel he is right. Besides we cannot hope to agree on particular skills any more than could the medical group, and even if we could we must take care lest we fail to map out the woods for seeing only the trees.

The question of a lay director of the movement of grading or a lay person to conduct a possible job analysis has been placed before the committee. The representatives of the American College of Surgeons and Doctor Fitzpatrick, Doctor Welch and myself wish to emphasize the position that the work should be entirely under the direction of a very capable, highly trained nursing leader, bringing the widest possible background of personal experience in the field of hospital administration and nursing education, not under a lay person.

In studying other grading movements to arrive at some formulation of my own opinion in the matter of the nursing program, my mind and heart have been deeply stirred by the response the hospital world has made to the minimum standard program of the American College of Surgeons. The idea of reading the bulletins of the Hospital Standardization series of the American College of Surgeons, like the idea of giving attention to the grading of nursing schools, sounded prosaic and dull at first contemplation. Instead, it proved a most unexpected experience. They quite move you. They have throughout a fine literary flavor and all the glow and thrill of a gospel. One cannot go far before one is convinced that they hold the key to the successful issue of our grading program.

It furnishes so good a model and points the way so clearly to a successful method of grading schools of nursing that I shall describe it, somewhat carefully and let the analogous plan for grading schools of nursing which I would indicate follow briefly at the end.

Dr. Harvey Cushing, in describing their program of standardization, shows how in the beginning it was purely selfish, that it grew out of the need of the College of Surgeons to standardize the workshop (the hospital) of its candidates for fellowship. Soon they forgot themselves in the greater discovery that only by making the hospitals right in all respects could they attain even their own ends. He adds, their sincerity was soon recognized, their disinterestedness welcomed, and the fact that their program represented an ideal that made actual greater efficiency in hospitals attracted toward its support all people and all organizations interested in more efficient care of the sick.

On June 1924 Doctor MacEachern stated,

> Our institutions have increased at least 50 per cent in their efficiency during the last six or seven years since the College of Surgeons took up the cause of hospital betterment.

A method that will produce that sounds curiously like what the League of Nursing Education covets for schools of nursing and hospital departments of nursing.

We find the Rev. Charles B. Moulinier, as President of the Catholic Hospital Association speaking on standardization on the program of the American College of Surgeons as early as June, 1922, saying,

> Some five or six years ago the American College of Surgeons, stirred down to the depths of its soul, began to realize that it had a mission to fulfill for the better care of the sick in the United States and Canada and made up its mind to improve surgery. But everybody knows that you cannot improve surgery unless you improve everything that centers in the work of the hospital and so the American College of Surgeons had not gone very far into its effort and purpose to improve surgery when it realized that it had to improve everything in medicine * * *.

Thus began what Father Moulinier told them that day they were doing for the country in so thoughtful, really scientific, deeply conscious way that

> there is no doubt of it, gentlemen, if I am at all safe in my conclusions in the reading of history, that there has never occurred a movement equal to it in the past history of our race * * * and it is sure to reach the rest of the world.

The Executive Secretary of the Conference Board of Hospitals and Homes of the Methodist Church states they intend to see the program put into effect, that they find laymen and boards of trustees are so immensely pleased with the progress made by its adoption that they consider the extra costs well justified. I would like to borrow a method for grading nursing schools that would make laymen and boards supporting hospitals feel that way about improvements in nursing education fundamental to the best care of the sick.

In 1918, 12 per cent of the hospitals of 100 beds and over were approved, of 692 visited. In 1921, 86 per cent of the hospitals of 100 beds and over were approved, of 961 visited, and 69.3 per cent of all hospitals of 50 beds and over in the United States and Canada surveyed, 2,360 in all, were approved. The hospitals under the control of the United States Navy, Army, and Public Health Service and the Veterans' Bureau have been surveyed on request.

What is the secret of the success of this program? It seems to go back by common agreement to the fact, (1) that the initiation of the movement came through a trained medical mind as well as through the accumulation of ideas from those who had actual practice in hospital administration, that the men formulating and guiding the work of the minimum standard and carrying it into the field were all men of outstanding ability and experience in the field of hospital administration; and (2) to the brevity, simplicity, and nature of the minimum standard formulated, one calculated to set in motion growth and improvement from within, all tending toward the better care of the sick, not a classification scheme imposed from without.

Five brief fundamental **working** principles and conditions of hospital organization called a Minimum Standard, printed on one page, that were so essential that no hospital without them

was a safe place for the practice of medicine or the care of the sick, a document that has achieved international fame. "Briefly," states Dr. Franklin H. Martin, Director General of the American College of Surgeons, "the Minimum Standard with which it was believed every hospital should conform, provides the following:

1. An organized medical staff comprised of qualified physicians and surgeons.
2. A monthly meeting of the staff members to review the professional work of the hospital.
3. A system of comprehensive case records.
4. An acceptable clinical laboratory.
5. Satisfactory evidence by the hospital authorities that the medical staff of its institution is comprised of legal practitioners of medicine who are opposed to the division of fees.

They do not seem too much to ask to safeguard the sick. I wish we could do the same for our hospital nursing departments and schools. A few briefly stated fundamental principles of school and nursing staff organization, records, standards of equipment, acceptable hospital facilities, supervision and distribution of services, admission regulations, curriculum and living conditions without which it would not be safe to undertake the training of student nurses at all to care for the sick. This does not seem too much to ask to safeguard the care of the sick, either.

I do not think we should go very far afield for a functional analysis upon which to base such a program. I think we should review the facts of nursing education projected and now in operation, and summarize their essential principles and contents. As experts in the field of nursing school and hospital affairs I think we should review our concepts of the duties of the nurse, their range, historical developments and general trend, and on the basis of those for which we deem her most peculiarly fitted and obligated to perform in the best interests of the care of the sick and the prevention of disease, we should proceed to formulate as briefly as possible in a page or two a minimum standard constituting those fundamental working principles for school and nursing department organization without which a school of nursing could not be safely recognized a school of nursing at all.

I covet for the League of Nursing Education and the general committee on grading of nursing schools that we too should be invited to the "Christening" of American Hospitals, so many of which are being named "Accredited."

Let us bring to the christening of schools of nursing and nursing departments gifts of equal value to those that wise fairy, the American College of Surgeons, has been bringing to her hospital christenings these seven years; who comes not like the uninvited ugly fairy to criticise and make public and odious comparisons of the children christened, but to bestow such goodly gifts of character, alike upon the princelings who invite her, that in the light of knowledge each becomes zealous and honest and fearless in searching out his own faults and shortcomings, brave in their eradication, and wise and full of joy in his attainments.

A few guiding principles called a minimum standard whose bestowal are among the most priceless, fruitful and convincing treasures within the power of choice or gift. No wonder the "christenings" have gone from 12 per cent to 86 per cent in five short years. No

wonder. communities and trustees are becoming proud of their hospitals and more conscious of their own obligation to be at the christening also, to bestow sound business policies and all the equipment and support that such a child deserves. No wonder these children, even those whose heredity was pretty discouraging, are developing into strong members of society and prospering and serving as never before. No wonder better medical treatment and care are being assured to every one, everywhere, rich and poor, throughout the breadth of the land. No wonder one's heart and mind are stirred with the hope that the nursing school and department child shall not be left anywhere giftless, a misguided, weak, poor little Cinderella, but that she too may be fostered and loved and strengthened and encouraged to grow beautiful, intelligent, gracious, dependable and useful in her maturity, deserving to be welcomed not only among those who serve the world with humility and skill, joy and pride, but welcome also, and untrammeled, among the learned of the land.

May a fitting place be made for her in the educational systems of our day. And may the paths she wears through vocational fields lead as directly, as her duties there will permit, to those paths she will travel inside the gates of higher learning and life's experience to broader understanding and truer usefulness.

Can we, do you suppose, as nursing leaders, emulate the methods of the American College of Surgeons? They sought to make hospitals the best possible place for the physician to heal the patient, for the graduate and undergraduate physician to acquire clinical skill and medical knowledge, immediate and remote, to assure the sick good care in illness and help in keeping well. We seek to make nursing schools and nursing departments in hospitals just such places for the student nurse, in the opportunities and ways to acquire skill and knowledge in the care of the sick and the prevention of disease.

I think we may win the same favor and success in our undertaking as they have in theirs, even gain nearly as much momentum in a short number of years if we successfully adapt and imitate their policies, impose no critical inspections, or invidious comparisons. We must make our gifts of character, our minimum standards, those few essential to the presence of a school of nursing in a hospital at all, the fewest possible, most simple and practical guiding principles, not detailed, stereotyped outlines or patterns of attainment. Let them be formulated by nursing leaders, not lay people, in terms of first-hand and long experience in the actual field of nursing education, and nursing school and hospital administrative practice. Finally, let the direction of the work and the offer of this minimum standard to the hospital schools be in the hands of a group of nursing leaders experienced in the problems, ways, needs and prejudices of the hospital, medical, and nursing world. Let us also not be impatient or demand premature growth. Let us remember, as one of the members of the College put it, that "time is an essential factor in any creation" and that "it remains as true today as when it was written that 'he that believes shall not make haste.'"

Let us not throw a great search light of critical analysis over the schools of the land to search out the good and the

evil of their ways, but kindle lights burning in each of them that will welcome us. We can so place these individual lights and turn them high enough to make clear all essential faults, but low enough not to show harsh outlines too discouragingly at first. And as those within bring things to order, they will themselves turn the light up higher to see a little clearer and finally higher still that the community may see too how much pleasanter and more effective place the hospital is, since schools of nursing are adequate too.

ANY PRO TO ANY SISTER

F I'm the dunce you say,
Setting the ward astray,
Failing the dust to see,
Bed-making carelessly,
Cause of your misery,
Sister Aroon

Does not your history show
That you were once a Pro.,
And in those days gone by,
That now forgotten lie,
Were you not such as I,
Sister Aroon?

Here is one of the poems with illustration from the 1926 Calendar of The National League of Nursing Education. Read the remaining stanzas and 12 other poems on nursing in the beautifully illustrated Calendar which is now on sale.

Send in your order for immediate delivery to The National League of Nursing Education, 370 Seventh Ave., New York City. The price of the Calendar is $1 per single copy, 75 cents per copy on all orders of 50 or over delivered in one shipment. Proceeds of the sale will be used to help maintain and develop the activities of The National League of Nursing Education.

REVISION OF THE STANDARD CURRICULUM

(Continued)

NURSING IN GENERAL SURGICAL DISEASES[1]

Time: 30 hours, divided as follows,—lectures by a surgeon, 16 one-hour periods; classes by nurse, clinics by surgeon or nurse, 13 one-hour periods; examination, 1 hour.

Objects of the Course

To give the student a good general knowledge of the principal surgical diseases, their etiology, symptoms, operative and post-operative treatment, so that she may care for surgical patients intelligently and skilfully, be of the greatest possible assistance to the surgeon in promoting the patient's recovery after operation, and be able to teach people with whom she comes in contact the necessary principles in the prevention of surgical diseases.

Outline of Lectures and Classes

I. *Lecture—Introduction.*

Brief history of surgery. Bacteriology and its relation to surgery reviewed. Antiseptic and aseptic surgery. General principles of modern surgery. The surgical field.

II. *Lecture—Wounds and Wound Infections.*

Wounds—accidental and operative, clean and infected. The healing process. Pathological conditions reviewed,—inflammation, suppuration, necrosis, gangrene, septicemia, pyemia, erysipelas, tetanus.

III. *Lecture—Pre-operative Treatment of the Patient.*

Preparation for operation, general and local. Anesthesia,—types, methods of use.

IV. *Lecture—Post-operative Treatment of the Patient.*

General considerations. Pain,—cause, symptomatic treatment. Complications,—nausea, vomiting, hiccoughs, gastric dilation, tympanites, intestinal obstruction, embolism, thrombosis, hemophilia, acidosis, retention and suppression of urine, shock, hemorrhage, wound infection. Treatment of complications. Feeding of post-operative cases.

V. *Class—The Pre- and Post-operative Nursing of the Patient.*

Accuracy in observation and reporting, thoroughness in technic. Nurse's influence on patient's attitude toward operation. Post-operative care,—position, thirst, restlessness, elimination, diet, drugs, dressings. Prevention of complications. Convalescent care.

VI. *Lecture—Diseases of the Alimentary Tract*

Malignancy of the lip, jaw, tongue. The esophagus,—diverticuli, stricture, carcinoma, foreign body. Stomach,—ulcer, carcinoma. Causes, importance of early diagnosis and treatment. Common operations.

VII. *Clinic on Diseases of the Stomach, and Esophagus if possible.*

VIII. *Lecture—Diseases of the Alimentary Tract (continued).*

Appendicitis, intussusception, peritonitis, perforation. Operations.

IX. *Class—Nursing Measures Used in above Conditions.*

Hygiene in mouth cases. Diet and excreta in gastric conditions. Case reports.

X. *Lecture—Diseases of the Alimentary Tract (continued).*

Hernia, intestinal obstruction, carcinoma, fistula, hemorrhoids. Operations.

XI. *Clinic on Diseases of the Intestine.*

Care of colostony wound.

XII. *Lecture—Diseases of the Gall Bladder, Pancreas, Liver and Spleen.*

Cholelithiasis, chronic cholecystitis. Pancreatitis, injury to pancreas. Liver,—abscess, cirrhosis, injury. Carcinoma. Operations. Spleen,—removal in anemia, injury.

XIII. *Class—Nursing Measures in above Conditions.*

XIV. *Lecture—Diseases of the Respiratory System.*

The larynx,—malignancy, foreign body, tracheotomy. Empyema. Subdiaphragmatic abscess, lung abscess, foreign body. Operations. Artificial pneumothorax. Bronchoscopy.

[1]This outline has been prepared by the following sub-committee: Daisy Dean Urch, Mary E. Robinson, June Ramsey, Marion Rottman, Mary Wakefield, Marion Vannier, Mary E. Norcross, and Mary May Pickering, chairman.

XV. *Class—Nursing Measures Used in Empyema, Tracheotomy, etc.*

Prevention of shock, pneumonia.

XVI. *Lecture—Diseases of the Breast.*

Importance of correct early diagnosis of breast tumor. Hypertrophy, acute mastitis and abscess, benign tumors, carcinoma, sarcoma. Operations.

XVII. *Clinic on Diseases of the Breast and of Respiratory System.*

XVIII. *Lecture—Diseases of the Thyroid Gland.*

Goitre, cause, types. Prevention of goitre. Treatment. Operation.

XIX. *Class—Nursing Measures in Surgery of the Thyroid Gland.*

Basal metabolism. Toxic cases. Anoci-association.

XX. *Lecture—Diseases of the Lymphatic Glands.*

Lymphadenitis — acute and tuberculous. Lymphosarcoma. Hodgkin's Disease.

XXI. *Clinic on Diseases of Thyroid and Lymphatic Glands.*

XXII. *Lecture—Surgical Conditions and Surgery of Nervous System.*

Congenital malformations,—spina bifida, hydrocephalus. Trauma—fractured skull, brain injury, fractured spine, spinal cord injury, brain abscess.

XXIII. *Class—Nursing Measures in Neuro-surgery.*

Pulse, respiration, blood pressure. Paralysis and sensory impairment. Delirium. Restraint. Spinal puncture. Case reports.

XXIV. *Lecture—Surgical Conditions and Surgery of Nervous System (continued).*

Brain tumors, spinal cord tumors, types, symptoms, localization, treatment. Tic douloureux.

XXV. *Clinic on Neuro-surgical Conditions.*

XXVI. *Lecture — Fractures, Dislocations, Sprains.*

Treatment of dislocations, sprains. Types of fractures. Reduction and immobilization of fractures. Types of bony union. Splints and appliances. Suspension and traction.

XXVII. *Clinic on Fractures, Dislocations, Sprains.*

XXVIII. *Lecture—Plastic Surgery.*

Harelip. Cleft palate. Burns. Skin grafts. War surgery.

XXIX. *Class—Nursing Measures in Plastic Surgery and Burns.*

Feeding, mouth hygiene, restraint, etc.

XXX. *Examination.*

Methods of Teaching

Same as Nursing in General Medical Diseases. (See *The American Journal of Nursing*, Vol. XXV. No. 10, p. 862.)

Equipment and Illustrative Material

Surgical patients on hospital wards. Laboratory specimens showing diseased organs. Skeleton. Anatomical charts. X-ray films, fluoroscopic clinics.

Text and Reference Books

Group I—Very Desirable or Essential.

Colp and Keller—Text Book of Surgical Nursing.

Harmer—Principles and Practice of Nursing.

MacDonald—Essentials of Surgery.

Parker and Breckenridge—Surgical and Gynecological Nursing.

Woolf—Principles of Surgery for Nurses.

Group II—Recommended for Use of Teachers and Wider Reading of Students.

DaCosta—Modern Surgery—General and Operative.

Rose and Carless—Manual of Surgery.

Saleeby—Surgery and Society.

White—Textbook of Surgical Handicraft.

NURSING IN SURGICAL SPECIALTIES

(Covering Orthopedics, Gynecology, Urology, and Operating Room Technic)

Time: 30 hours. Lectures by surgeon, clinics by surgeon or nurse, and classes by nurse.

Objects of the Course

Same as in General Surgical Nursing.

Outline of Lectures and Classes

Unit A—Orthopedic Nursing—10 Hours

I. *Lecture.—Introduction.*

Definition of Orthopedics. Brief history of orthopedic surgery showing the marked

progress of the last few years. Need for trained orthopedic workers. Physiology and pathology of joints, normal motions and methods of examination for abnormalities. Classification of deformities—congenital and acquired.

II. *Lecture—Tuberculosis of Bones.*

General symptoms and principles of treatment with special reference to the joints most frequently affected,—hip and spine.

III. *Class—Nursing Care of Tuberculosis of Bones.*

Hygiene; prevention of tuberculosis. Special nursing care for specific joints. Making and application of moleskin, or adhesive extensions. Covering and padding of frames and shells.

IV. *Lecture—Rickets.*

Relation to orthopedics. Deformities due to rickets and their prevention in the acute stage. Treatment of scoliosis, bow legs and knock knees.

V. *Clinic on Tuberculosis of the Bones and Rickets.*

VI. *Lecture—Anterior Poliomyelitis.*

Prevention of deformities in acute stage. Prevention and correction of deformities after acute stage. Physiotherapy—massage, baking, and muscle training. Corrective apparatus. Operations.

VII. *Class—Nursing Care of Patients Wearing Apparatus or Plaster.*

Classification and purposes of apparatus—(1) to maintain position—(2) to prevent weight bearing—(3) to exert traction—(4) to immobilize. Care of patient in plaster. Application and care of apparatus—traction splints, Thomas splints, caliper splints and braces. Making of special appliances, as for head traction in torticollis cases. Prevention of pressure sores.

VIII. *Lecture—Congenital Deformities and Dislocations.*

Club feet, congenital dislocation of the hips, web fingers, absence of bones, exostoses, obstetrical and spastic paralysis.

IX. *Lecture—Arthritis.*

Type I, Rheumatoid — proliferative and ankylosing, occurring generally from infancy up to 40 years. Type II, Hypertrophic, degenerative and non-ankylosing, occurring generally after 40 years. Causes, symptoms, treatment. Bodily mechanics or posture—the study of weight bearing under the influence of gravity; front and long arches of feet; hips and knees; position of pelvis, back and shoulders.

X. *Clinic on Orthopedic Deformities and Corrective Measures.*

Unit B—Gynecological Nursing—6 Hours

I. *Lecture—Introduction.*

Brief history of gynecology. Anatomy and physiology of reproductive organs. Biology of reproduction. Menstruation. Puberty and the menopause. Menstrual hygiene. Functional disturbances,—dysmenorrhoea, amenorrhea, etc. Operations.

II. *Lecture—Gynecological Conditions and Surgery.*

Subinvolution, ectopic pregnancy, cystocele, rectocele, hydrocele, polypi, trauma.

III. *Lecture—Gynecological Conditions and Surgery.*

Tumors of ovaries and uterus, benign and malignant,—cysts, fibroids, carcinoma. Use of radium.

IV. *Clinic of Gynecological Conditions.*

V. *Lecture—Infections and Inflammations of the Reproductive Tract.*

Special reference to syphilis and gonorrhea. Causes of sterility.

VI. *Class. Nursing Care of Gynecological Conditions.*

Positions, protection of patient. Nursing care in different operations. Case reports. Nurse's relation to educational and ethical problems arising in gynecological nursing.

Unit C—Urological Nursing—5 Hours

I. *Lecture—Diseases of the Kidney.*

Movable kidney, infection of the kidney, perinephritic abscess, hydronephrosis, renal calculus, renal tuberculosis, tumors. Operations.

II. *Lecture—Diseases of the Bladder.*

Cystitis, calculus, tumors. Cystoscopy. Operations.

III. *Lecture—Diseases of the Prostate.*

Prostatitis, hypertrophy, malignancy. Operations. Post-operative care. Connell suction.

IV. *Class—Nursing Care in Urological Conditions.*

V. *Clinic.*

Unit D—Operating-room Technic—8 Hours

I. *Class—Introduction.*

Operating-room work,—requirements, possibilities, rewards. Technic. The operating suite,—its relation to the other departments. Ideal features—construction, light, heat, ventilation, fixtures, furnishings. Care and cleaning. Administration of operating room in its daily routine.

II and III. *Class and Demonstration. Operation and Care of Apparatus and Supplies.*

Autoclaves—construction, operation and care. Diack's tubes. Water sterilizers,—construction, operation and care. Solutions used,—their preparation and use.

Making and sterilization of dressings—linen supplies, sutures, needles. Sterilization of pitchers, utensils, basins, gloves. Care and use of cautery.

IV. *Class and Demonstration—Instruments.*

Use, care and cleaning, cost. General classes. Names and use of common instruments. Typewritten lists of instruments for common operations.

V. *Class and Demonstration—The Operation.*

Personnel of operating team; positions, and duties of each member. Technic. Setting up room and tables; "scrubbing up" routine; smock, glove, basin and pitcher technic. Preparation of patient on table, positions, support, preparation of field, draping technic; operative steps; duties of members of team; sponge count; emergency measures; removing patient to the ward; care of specimens; cleaning up and cleaning room; care of supplies.

VI. *Class—The Emergency Operating Room.*

Equipment of the emergency operating room. Emergency technic. Minimum requirements. Typical emergencies as a result of mine disasters, train wrecks, etc., and their handling, with and without standard equipment. Night operations. Arrangements of light and other special adjustments.

VII and VIII. *Lecture—Anesthetics.*

History of anesthesia. Types of anesthetics, local, spinal and general, and their uses. Types of inhalers. The equipment of the anesthetic room. The anesthetic table and stimulant tray. Oxygen apparatus. Nurse's care of the patient before, during and after the anesthetic. Principles to be observed in the administration of the commoner anesthetics. The preliminary steps. Unfavorable symptoms. Accidents. After-effects. Mental influences in relation to anesthesia.

Examination on Units A, B, C, and D.

METHODS OF TEACHING

Same as General Surgical Nursing.

ILLUSTRATIVE MATERIAL

Same as General Surgical Nursing.

TEXT AND REFERENCE BOOKS

Group I—Very Desirable or Essential.

Berry—Orthopedic Surgery for Nurses.

Colp and Keller—Textbook of Surgical Nursing.

Crossen—Diseases of Women.

Falk—Operating Room Procedure for Nurses and Interns.

Harmer—Principles and Practice of Nursing.

Hirsch—Compend of Genito-urinary diseases and syphilis.

Hirst—Manual of Gynecology.

MacDonald—Essentials of Surgery.

MacFarlane—Reference handbook of Gynecology for Nurses.

Parker and Breckenridge—Surgical and Gynecological Nursing.

Seifert—Gynecology for Nurses.

Sever—Principles of Orthopedic Surgery for Nurses.

Woolf—Principles of Surgery for Nurses.

Group II—Recommended for Use of Teachers and for Wider Reading.

Da Costa—Modern Surgery—General and Operative.

Fulkerson—Gynecologic Urology.

Jones and Lovett—Orthopedic Surgery.

Pybus—Surgical Diseases of Children.

Rose and Carless—Manual of Surgery.

Smith—The Operating Room.

Steindeler—Operative Orthopedics.

White—Textbook of Surgical Handicraft.

Reprints of this outline may be obtained from Headquarters, National League of Nursing Education, 370 Seventh Avenue, New York City. The price is ten cents per copy. A discount of 5 per cent will be allowed on orders of twenty-five or more.

DEPARTMENT OF RED CROSS NURSING

CLARA D. NOYES, R.N., DEPARTMENT EDITOR
Director, Nursing Service, American Red Cross

A CHRISTMAS MESSAGE

ONCE MORE the year in its course brings around to us the greatest of festivals which in one guise or another is universally known. To all American Red Cross nurses—and they number over one thousand more, this December, than last—Miss Noyes extends the sweetest of wishes, long time-honored, peace on earth and good will in the service of mankind. Wherever each member of the nursing enrollment of 42,000 is on Christmas morning will be taken to her in thought from Washington, thanks for her work in the past year, wishes for a happy Christmastide and during Yuletide, a glad New Year.

THE ANNUAL CONVENTION

As significant as any conference could be to nurses, when not strictly a nursing conference, was the Red Cross Annual Convention at St. Louis, Mo., October 12 to 15. The attendance of nurses was even larger than last year, seventy-four in all attending, sixty-five being Red Cross nurses. There was a special registration desk reserved for them with Red Cross nurses in attendance to look after them and Red Cross nurses also maintained the First Aid stations at the Scottish Rite Cathedral, where the large general sessions were held. Miss Noyes was one of the principal speakers at the opening day's evening meeting, when the national and international program of the American Red Cross was the subject. She outlined very graphically and interestingly the outstanding impressions of her tour of the schools established by the Red Cross in Europe, which *Journal* readers will have given to them month by month in these columns. (Those on Poland were given last month and Czecho Slovakia's follow elsewhere in this issue.)

In addition to the special round tables on aspects of nursing, there was not one of the general sessions that did not hold something of interest for nurses since their field today is so wide. Work in communities, whether city or rural, occupied a major part of the whole program and it is in that connection that Red Cross nurses are found as public health nurses, as home hygiene instructors, and in administrative work as Chapter secretaries. It was evident that more and more nurses are taking an active part in general Chapter activities, either as members of the various committees or as Chapter nurses; and in the exhibits, which showed Red Cross activities in a very complete and attractive manner, it was evident how very close their relation is to the general work.

The Public Health Nursing round table, over which Elizabeth Gordon Fox presided, as Director of the Service, was a very interesting and lively gathering, where doctors and nurses discussed Red Cross policy in regard to the relation between public health nursing and medicine. Three doctors representing Chapters and two lay members of the Nursing Activities Committee led the discussion. The conclusion reached was that no one definite way of determining such relation can be laid down for all

cases, but with the help of certain principles, well known to both, the relation could be adapted to meet local needs in the way most satisfactory to all. To take a case as an example: whether the doctor on the Nursing Activities Committee should be nominated by the medical society or selected by the Chapter, it was the feeling that in some instances the former would be better, but in other cases, the latter.

At the Home Hygiene round table, with Mrs. Isabelle W. Baker, Director of the Service, in the chair, most interest was shown in the discussion regarding the extension of the work in schools. At first it was apparent that the Red Cross coöperative plan for giving the course in schools and the part played in it by the instructor was not completely understood. Chapter representatives early in the session were of the opinion that, except in those cases where a school had a nurse as member of its staff, a nurse instructor need only be supplied for the period of time necessary to give the practical procedures, leaving the rest of the teaching to the teacher of the subject with which home hygiene is correlated. Discussion brought out the advisability of at least half of the twenty-four hours' instruction in the course being given by the nurse because it is only she who has the requisite training and background to make application of the points taught by the teacher of the other subject; and in addition it is she who necessarily must be responsible for the practice teaching of the students.

State Association Meetings

Miss Noyes has made a point during the past two months of attending the meetings of the various State and District nursing associations. She has been present in the last six weeks at those of Ohio, Alabama, Pennsylvania and New York and by the time these lines appear in print, she will also have visited Georgia's and Delaware's. They afford excellent opportunity for the Chairman of the National Committee on Red Cross Nursing Service and its Director to make the nurses of the country acquainted with general activities as well as with the constant need for keeping up enrollment. It is because of the close connection between the American Red Cross and these arms of the American Nurses' Association, which may not be known to the younger members, that such attendance is important. The American Nurses' Association is the only organization affiliated with the Red Cross; the State Associations have the privilege of appointing a delegate to its annual meeting with a voice upon all questions brought up through these 49 votes. This official recognition on its reverse side means that the Red Cross Nursing Service has the support of the American Nurses' Association.

One of the weightiest offices performed by the State Associations is the recommendation of suitable nurses for service on the State and Local Committees on Red Cross Nursing.

It is apparent that the relationship between the American Nurses' Association through its constituent bodies and the American Red Cross is a very vital one, not only to the latter but to the nursing profession of the United States. It is because the State Associations recognize this that they arrange special Red Cross meetings at which as well as at least one of the general sessions, often

a luncheon or dinner, presentation is made of matters of importance and interest from both angles. Exhibits are also there to give point to the narrative and Red Cross nursing field representatives to present a fair picture of Chapter nursing activities in the field of public health nursing or home hygiene. Nurses appreciate, too, the arrangements made for answering questions on enrollment in the Red Cross Nursing Service.

Visiting Czecho Slovakia

Continuing the narrative of the tour in Eastern Europe, with its insight into the progress in the schools of nursing established by the American Red Cross, Czecho Slovakia is next in the itinerary. *Journal* readers will recall that in 1919, four Red Cross nurses were provided as director and assistants to establish modern nursing in connection with the State Hospital, Prague (State Hospital, by the way, in Czecho Slovakia, does not mean an institution for the care of mental cases, but one that receives state aid—in this case, the State Hospital was used as a University clinic.) In addition to the provision for the school the Red Cross provided a number of nurses to develop child welfare centers. By 1923, the work had been developed to the necessary point and the last American nurses left the school which was turned over to the native nurses as were also the child welfare centers. It was therefore a matter of great interest to Miss Noyes to visit Prague and see the school and centers again after an interval of two years; and to note whether the work of the Red Cross nurses in the country had been sufficiently constructive in its nature to have continued unchecked.

Unfortunately, Czecho Slovakia like most of the other mid-European countries has a way of closing its hospitals, clinics, health stations, etc., during the month of August so that the staff of doctors, nurses and others may take a vacation. This rather startles an American nurse, for it is then that mothers and little children need the greatest attention especially in connection with feeding. While unquestionably, it is of great convenience to the institutions to be able to close for a month, rendering the matter of cleaning and inventorying somewhat easier, one wonders what happens and if no babies are born in those countries during that time and if no one falls ill.

It thus came about that Miss Noyes was disappointed to find the activities of the school and child welfare stations in Prague completely suspended. She was only able to see the Nursing Director of the School—a very charming woman and nurse—and a few others who assured her that work had continued and remained at the point it was when the American Director had left. In a measure this was gratifying, and it was interesting to go over the curriculum and discuss the problems of the school, but nothing takes the place of a visit to the workshop—in this case, the wards of the students and the welfare centers of public health nursing.

Prague in itself is a most quaint and appealing city with its wonderful old castle—the home, by the way, of President Masaryk where Alice Masaryk gave a luncheon in honor of Miss Noyes—upon the high hill reached by crossing the Moldau over one of the ancient and picturesque bridges, one of which, the Charles Bridge, with its figures of

apostles and saints standing at regular intervals on the coping, is of great interest. No nurse who is concerned with the extension of her historic and artistic background should lose opportunity to visit the old city of Prague, capital of far famed Bohemia disguised under its new name of Czecho Slovakia.

Red Cross Nursing in Japan

Red Cross nursing in Japan is making considerable development according to the interesting glimpses given by Iku Todoriki, Assistant Superintendent of the Japanese Red Cross Central Hospital school of nursing, Tokyo, who with Madame Shin Inouye, honorary secretary of the national organizaiton, recently visited National Headquarters. They were the Japanese Red Cross' official delegates to the Helsingfors Congress of the International Council of Nurses and have been traveling since in eleven countries studying the schools of nursing. In the United States, before leaving on November 24 for Tokyo, they made a point of seeing the hospitals and nursing schools in New York, Washington and San Francisco, Miss Noyes planning the arrangements. Of all the institutions visited, the Walter Reed Hospital impressed them most because its system is very like the one with which they are familiar and they felt "at home."

Miss Todoriki explained through Madame Shin Inouye, who acted as interpreter, that the Japanese Red Cross itself develops nurse education through its 18 schools of nursing from which about 2,000 nurses graduate annually. The Osaka Hospital has the largest training school—some 400 beds—and her own institution in Tokyo ranks next, with the one at Nagano as the third largest in Japan. In order to maintain an excellent standard of education for student nurses, care is taken to have a large staff and a much greater number of students than of beds. The Tokyo Central Hospital, for instance, which has 250 beds, has 50 graduate nurses and 450 students.

Japan has had visiting nursing for a number of years, but now it is being developed as much as possible. Special attention is being paid to the nursing of the tuberculous in rural districts, where considerable interest has been aroused in nursing as a result of the great earthquake and other disasters. Incidentally, it is to be noted that these, too, have caused girls of the better class to turn their attention to nursing, realizing the need through those experiences, and students of excellent type are now entering the training schools. School nursing was started five years ago with five nurses; today there are about 50 employed by schools and the number is increasing all the time. The Red Cross is also sending out a woman doctor and nurses to give lectures on home hygiene and home nursing.

The Nursing Enrollment of the Japanese Red Cross numbers about 8,000 nurses, two-thirds of whom are in actual service, one-third forming the reserve. For twelve years after graduation, these nurses can be called into service at any time, it being obligatory. At the end of the period, they automatically cease to be Red Cross nurses unless they themselves wish to continue service which becomes thereafter a purely voluntary matter even in great emergency. Each year during the entire period, graduates go back to their

training schools for one week to keep themselves abreast of the newest developments in nursing.

Miss Todoriki, who has been in the service of the Japanese Red Cross for thirty years, has served in three wars: the 1900 Boxer Rising; the Russian-Japanese war; and the Great War when she was in Vladivostock. She has been decorated three times, once by the Imperial Japanese Government with the Ho Kan Sho, the Japanese distinguished service medal for women.

Unreturned Badges

A further list of names is given of those American Red Cross Nurses whose enrollment has been annulled but whose appointment cards and badges have not been returned. Nurses are reminded that these always remain the property of the Red Cross and must be returned to National Headquarters when enrollment is annulled:

Mrs. Harry B. Anderson (nee Esther A. Johnson), Mrs. F. B. Austin (nee Ella Hamilton McLean), Mrs. J. A. Bartram (nee Leah Powdermaker), Frances Myrtle Beacroft, Mrs. A. J. Becker (nee Vae Smith), Katherine P. Blackinton, Ella Reynolds Byrne, Ethelyn Hillery Calwell, Edith J. Carr, Winnifred Eugenia Carradime, Nellie Gray Clashman, Minnie Louise Connor, Eva Luella Cooke, Mary Irene Cuvelier, Nellie Mae DeBruler, Mary E. Dempsey, Margaret T. Fairbairn, Mrs. Harold Ferguson (nee Mary Edyth Moree), Roberta Florence Giddens, Mrs. Nonye K. Hill, Margaret Cecelia Holleran, Carolyn Beatrice Holmes, Genevieve Rivers Jules, Elizabeth Lillian Kennedy, Mrs. Maybelle B. Kleckner, Mrs. Anna Howell S. Kopp, Regina C. Lawlor, Esther S. Loos, Amelia W. Vandenberg, Helen Marie Ziegler.

Items

Miss Lloyd Still, who is the matron in chief of St. Thomas Hospital, London, and who followed Florence Nightingale as head of the first school of nursing planned along modern lines, is visiting the United States as a guest of the Rockefeller Foundation to make a tour of inspection of the most important American hospitals, in order to study the latest scientific developments. When in Washington recently, as the guest of Major Julia Stimson, Superintendent of the Army Nurse Corps, she spent some time at National Headquarters, declaring at the close that she was "thrilled and impressed with the general organization of the American Red Cross, its Nursing Service and its other Services." Miss Lloyd Still is a member of the Nursing Advisory Board of the League of Red Cross Societies, a member of the House Committee for the residence at 15 Manchester Square, London, of students of the International Public Health Nursing and other Courses and a member of the Joint Advisory Committee for the League Course for nurse administrators and teachers in schools of nursing.

Helen Gertrude Churchill, who was one of the American Red Cross nurses with the Near East Relief in Constantinople and Greece, was another visitor at National Headquarters in the past month. She returned to the United States after three years in the Near East, in the summer, resigning the directorship of the school of nursing in Athens, first organized by Katherine McFarland. It was her continued interest in the future of the school that brought her to Washington to visit the Greek Minister. Miss Churchill is a graduate of the Boston City Hospital and Lying-in Hospital, and was in the U. S. Public Health Service for three years, following a year in the Army Nurse Corps, before she went abroad.

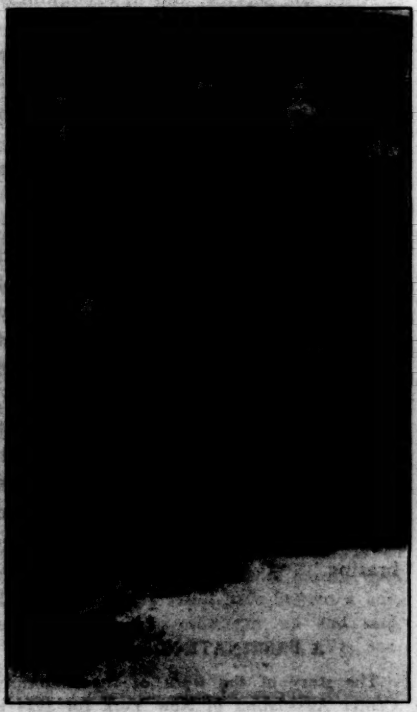
Nan L. Dorsey, a graduate of the Moses Taylor Hospital, Scranton, Pa., who enrolled in the American Red Cross Nursing Service in 1910, went to England in 1924 to take the International Public Health Nursing Course, and has now joined the staff of the League of Red Cross Societies in London where she will be in charge of the Students' Home at 15 Manchester Square as Assistant to Mrs. Carter, Director of Studies. She was elected President of the International Students' Alumnae Association last June.

STUDENT NURSES' PAGE

OUR CHRISTMAS

By Winifred MacPherson and Katherine Scott

Edward W. Sparrow Hospital, Lansing, Michigan



CHRISTMAS IN Michigan is almost always a white Christmas, we hear the crunching of snow, the gay laughter of children on their sleds, and as the season approaches, loads of young fir trees pass the Nurses' Home and we know that Christmas is coming.

In the Hospital, eight Christmas trees are to be trimmed, some little, some big, but all are covered with decorations and as we trim them we see the homesick expression of the patients, for his or her own fireside at this season of the year, change to one of bright expectancy for the coming festivities of the Hospital.

All the Christmas packages are held in the Training School Office and none of us can get even a glimpse of them until Christmas Eve, but great is our curiosity nevertheless.

Each Christmas Eve our Nurses' Home is the scene of a jolly party; the residence is a picture of true Christmas cheer, with its wreaths of holly and sprigs of mistletoe. The Christmas tree, which is large, is ablaze with myriads of colored lights and is laden with remembrances for all. The student nurses have presented a play each year, among which are, "Christmas at Finnigan's Flat" and "The Bird's Christmas Carol." No one can forget Mrs. Ruggles or Carol Bird in their pleasing impersonations and as for Mr. Finnigan, he was the last word. The play is followed by the entrance of old Santa Claus who distributes the gifts to the merry-makers. Among the presents are huge baskets of fruit and boxes of candy and nuts which are presented to the nurses by the doctors and different societies of the city.

The entrance of Santa Claus is succeeded by a daintily served luncheon and various games and stunts are enjoyed, until tired and happy we are sent to bed.

In the grey light of Christmas dawn we hurry briskly toward the Hospital, the house tops, trees and shrubs are completely covered with the glistening

light of the snow. The crisp December air is invigorating and all are filled with the true Christmas spirit. Dimly, at each patient's window can be seen the wreath of holly which announces the coming of Christmas. The stars on the peaks of the two Christmas trees fastened high on the post of the porte-cochere illumine our pathway even as the Star of the East guided the Wise Men long ago.

The entrance of the Hospital is gaily decorated with streamers and holly and from the central dome of lights in the corridor hangs a great Christmas bell. The students wind their way through the Hospital corridors, their twinkling candles proclaiming the approach of morning. The old English and modern carols resound through the long halls, even to the very doors of the dining room. Each nurse stands at her respective place at the table which is artistically arranged with holly and evergreen and illuminated by the mellow glow of numerous red candles. A prayer is offered to the Giver of all Good. After being seated, a wholesome breakfast is served.

About ten o'clock in the morning, under the direction of the Ministerial Association of Lansing, a Christmas service is held in one of the sun parlors which is resplendent with a magnificently decorated Christmas tree. All the patients, who are able, are taken to the service in wheeled chairs and those remaining in bed can at least enjoy the music.

A male quartet causes the halls to reverberate with music, driving away all semblance of pain and sorrow with their old but ever beautiful Christmas carols, devout and sweet in measure and bearing the message of Peace on Earth, Good Will to Men.

After the service, and in exemplification of the Christlike spirit, the Christmas Fairy, one of our students, daintily dressed in filmy white and silver, carrying a wand in her hand, quietly visits each patient. She is followed by a perfect little Christmas tree on a rolling platform which is donated and decorated by the Vivian's Society of Lansing. About the base of the tree are heaped the most beautiful and luscious of fruits. No one is forgotten; the Fairy presents her gifts with a cheerful and encouraging word, leaving a trail of good cheer and happiness behind her. The patients enjoy the Fairy, we hear her chattered about for days afterward, she seems to be a symbol of the love and sympathy of the Great Physician whose birthday all Christendom is celebrating.

A FASCINATING REPORT

The story of the work of the Maternity Center Association of New York for 1924 is published in an Annual Report of rare quality. Text and typography are of unusual interest.

The story told by colored graphs of the remarkable increase in the number of East Side mothers who seek Maternity Center care indicates a steady and rapid growth along the path of the Association's expressed objectives.

1. To teach the public the vital importance of adequate maternity care.

2. To secure, in coöperation with all existing agencies, such care for all expectant mothers.

LETTERS TO THE EDITOR

The editors are not responsible for opinions expressed in this department. Letters should not exceed 250 words and should be accompanied by the name and address of the writer.

A DEPARTMENT-STORE CHRISTMAS

DEAR EDITOR: We ran a very heavy hospital during the holiday time, one week caring for 505 patients and having nine wheel-chair calls in one hour at the peak. I am trying to convince our general manager that our heaviest expense is incurred by employes who are with us from three to ten days, and that they are the poorest as well as the dearest help we have. In fact, they are principally liabilities. The long delayed and poor Christmas season afforded much idle time for people to make themselves miserable in, and buyers and heads of departments reflected anxiety and resultant short tempers. It was a joy to find, in the most unexpected places, the Christmas spirit living and thriving in spite of these handicaps. I am wondering whether we shall ever know the time when cards and community trees and real Christmas feeling will take the place of the mad rush to exchange gifts, and so many tired people. I had the usual party and baskets for our locker and lavatory women, and added gold pieces for a dinner for the old carriers, and baskets of fruit for old employes sick in hospitals or at home. When I stumbled out late, with more parcels than I could manage, I could have hugged a boy, scarcely knee-high, who ran up and said, "Want a porter, lady?" I replied, "Yes, son, I do, in the worst way."

New York — AN INDUSTRIAL NURSE

"HIGH LIGHTS IN PEDIATRIC WORK"

DEAR EDITOR: A few years ago, we were having trouble with communicable diseases in our children's wards. The pediatricians decided if we could not have a cubicle ward at once; something must be done. This is the procedure they decided on. The patient is admitted to an examining room on the lower floor. (Ours is a children's ward in a general hospital.) A complete physical examination is given. Frequently the interne discovers a rash, Koplick spots, or peeling, or some other suspicious symptom. The child is then immediately sent to the communicable disease hospital. If the child, as far as the interne can discover, shows no signs of incubating, having active symptoms, or having had a communicable disease, the patient is sent to the ward. On admittance to the ward, a vaginal smear, for a female child, nose and throat culture, Von Pirquet, Wasserman, and ear examination are done. I teach the nurses to be ever on the watch, for, often after an admission bath is given, a rash will appear that was not noticeable before. We have had less trouble in the ward since this method has been adopted. We have a cubicle in which we can isolate a case which becomes suspicious at any time. A communicable disease in the ward is still a big thunder cloud in my skies; but we expect soon to have a cubicle ward.

Massachusetts — L. V. L.

STUDENT GOVERNMENT

DEAR EDITOR: Student government is sometimes criticized and we find defects just as in any organization. We always have the mixed group of loyal ones—wayward ones—curious ones, but if "honor" is the motto you rarely have a long-lived member in your organization who can give way to curiosity by trying to do certain things to see what will be done about it; the act is too cowardly and meddlesome and will not exist after a few attempts. Unless we expect the best that people have to give, as we also have to give to others the best that is in us, we are not living up to the precepts of student government. Indeed when we begin tc suspect our neighbors,—right then the organization begins to crumble, for a suspicious mind and an honorable one cannot tolerate each other. I have had arguments with critics who insist that the only way to know whether nurses go to bed on time and do what they are supposed to do, is to make periodical inspection as an executive. I do not agree. I expect the nurse to do the right thing and the minute I grow distrustful, that minute I fail to uphold the principles of student government. We are part of the institution which we represent, unconsciously we give to it a standing and character in the community and not one of us wishes to be part of anything artificial or slipshod. We must have

an open mind and a large heart and grow tolerant of each other,—the older of the younger, and the younger of the older.

"To thine own self be true," is not only a splendid moral, but also a fine support and uplift, we hate to cheat ourselves and we get nowhere doing it. It is most commendable to see class spirit displayed as much as possible; boosting is very exhilarating and contagious.

Pennsylvania E. K. S.

WHY THE CRITICISM?

DEAR EDITOR: The question of nurses' morals has long been one of discussion between ourselves and the public in general. Nurses are often spoken of as lively, or good sports, when the terms are not intended to be complimentary. I once heard a young girl speak slightingly of a nurse acquaintance, "My but she is a lively one." Her audience did not ask for an explanation, for the tone implied enough. Why do we have to be subjected to such criticism? Have we brought this on ourselves? As a body, we are certainly no worse and possibly no better than people of other lines of work. I think we compare favorably with any profession. There are the proverbial "sheep and goats" in every walk of life. We do not, as a rule, have the opportunity to attend church services that others have, but we have the great opportunity of daily living our profession. Our spiritual lives, as a rule, are very well developed at home before entering a training school. The schools can only do so much toward stimulating the nurse's interest in religion, the remainder is up to the individual. Possibly a nurse may be subjected to more temptations than some other people, but this only serves to form greater strength of character by resistance. When people work as hard as nurses often have to do, they may be inclined to more readily look for outside pleasures of a questionable character. Don't depend on what "they say." "Evil to him who evil thinks."

North Carolina Z. B.

FIFTY MILES FROM A DOCTOR

DEAR EDITOR: People think of Africa as the Dark Continent; instead, it is the Land of Sunshine. I have been here at work for five months. I can't say just all I want to in the native tongue as yet. I have gotten this far, however, that I can have a native maternity case without help and get the patient to do as I wish. Last week I was called to go to a kraal a distance of a mile and a half to see a woman in labor. This was at 7:30 p. m. and as dark as could be. We crossed one river and several ditches, all of which I tested to see how deep they were. I get dizzy when I'm stepping on stones or walking on a log over water. Then we had to climb the side of a mountain and crawl under low branches, but we did finally arrive to find the woman in a mud and pole hut with plenty of air holes where the mud had come off. She was lying at one side of the room on a mat with no covering, but had a fire at her feet. Two women and three small children were sitting on the side of the fire. In a short time we had a lovely little girl. I know you are wanting to know if my things were sterile. I took two old table cloths with me, one I put under the mother and the other I wrapped the baby in, tore a piece off one end, made a dressing and band for the baby; soaked the dressing in alcohol. In addition to maternity work, I have given more than three hundred treatments since July for cuts, bruises, infected toes and fingers, earaches, boils, burns, sore eyes, etc. Now, besides the above mentioned medical work, I'm also a dentist. I have pulled a dozen teeth and cut down one gum to remove an old root that was causing much pain. Besides the work of healing their bodies I'm trying to heal a few of the heart diseases that can be cured only by our Savior.

Rhodesia J. M. W.

INFORMATION WANTED

Information regarding the following nurses is desired by Katharine W. Kerr, Correspondent, Spanish-American War Nurses, 2914 Broadway, New York. Please send the information directly to Mrs. Kerr. Mrs. Russell Beal (nee Rosa Kane), Emma V. Dillworth, Mary A. Gleason, Elizabeth Houser, Mrs. H. Tupes (nee Josephine Kephart), Mrs. S. M. Warner (nee Emma Kennedy), Lutie Stimson, Besse Severence, Ella E. Sixton, Olive Phillips, Ella Richards, Lillian E. Riley, Florence E. Otto, Priscilla Myers, R. T. Moran (nee M. E. McCormick), Katharine

Monaghan, Mary E. McCrae, Mrs. Helen McLannin, Gertrude Buchner.

GREETINGS

DEAR EDITOR: It gives me real pleasure to congratulate "us" on our 25th birthday, and I think I may use that pronoun. I have watched the growth of the *Journal* very closely, first from Philadelphia and now from Denver,—a member of the Trained Nurses' Association of Denver. We are celebrating the 25th anniversary of our Association by publishing a booklet. Our membership is made up of nurses graduated from all over the world. To our absent members,—greetings!

Colorado N. W. C.

CRITICISM

DEAR EDITOR: I am hoping that this excellent magazine will soon return to its former custom of printing articles of *general* interest and not pursue the present policy, which I feel is purely temporary, of catering to education propaganda and schemes for nursing education.

Quebec L. B.

[We receive so few criticisms that we are more than willing to publish this one and invite further comment, especially that of a specific nature stating what is wanted and what is not.—ED.]

JOURNALS NEEDED

Inger Bergh, The Deaconess Hospital, 2312 Fifteenth Avenue South, Minneapolis, Minn., —March and May, 1918.

Katherine E. Dougherty, Minneapolis General Hospital, Minneapolis, Minn.—1905, October-December; 1906, January-April, July, August, December; 1907, January-September and December; 1910, January-April; 1911, August-November; 1912, May; 1913, May-July, October-December.

QUESTIONS AND ANSWERS

The editors will welcome questions and will endeavor to secure authoritative answers for them.

14. Can you advise me as to the technic used in sterilizing a glucose solution made with Dextrose Merck to be given intravenously? The technic that has been given before causes the sugar to caramelize and it therefore cannot be used.

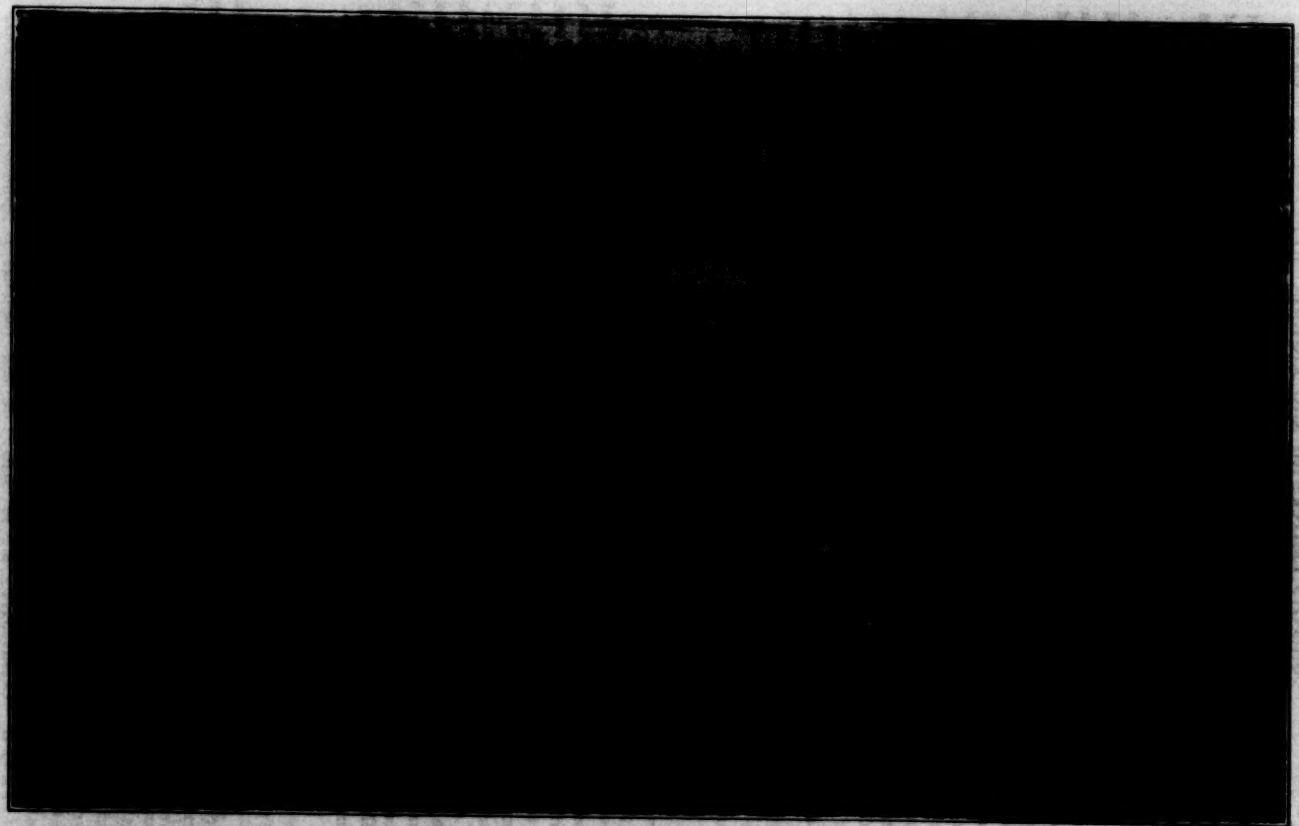
Answer. In the Children's Hospital of Philadelphia, a 5 per cent glucose solution is the strength most commonly used for intravenous injection. This is prepared by dissolving either Dextrose-Merck or Dextrose Pure (Difco) in distilled water in the proper proportions. Distilled water is used because of the possible action of chemical impurities which might be contained in ordinary sterile water.

The solution in a Pyrex flask is brought to the boiling point over an asbestos mat on a gas flame and is then autoclaved for ten minutes at fifteen pounds steam pressure. This method will produce a sterile solution when not more than 500 c.c. are contained in a single flask, and there will be no caramelization from over-heating.

SUSAN C. FRANCIS, R.N.

OLD SUBSCRIBERS

The editors regret that they are unable to keep their promise that a list of the subscribers who started with the *Journal* in 1900 would be published. On examination of the files it was found that the cards do not show any date older than 1903. Some one, at some time, brought forward the records to that date.



PORTION OF A GROUP OF DELEGATES, AMERICAN HOSPITAL ASSOCIATION

AMERICAN HOSPITAL ASSOCIATION MEETING

"We seem to be hearing a lot about Louisville all of a sudden," said a New Yorker not long ago. And so we do, for Louisville with its big Jefferson County Armory, and excellent new hotels to supplement the Seelbach, long a favorite, has blossomed out as a convention city. Louisville is easily accessible from all directions and in addition to the physical equipment essential to a successful convention, is blessed in abundant measure with that oft discussed but intangible quality known the world around as Kentucky hospitality. When the Kentuckian says, and he often does, that he's *glad* to see you he really means it.

About 2,000 people registered at Louisville for the twenty-seventh American Hospital Association convention, and the ballroom of the Brown Hotel was well filled for the opening session presided over so adequately by the President, E. S. Gilmore, Superintendent of Wesley Memorial Hospital, Chicago. The greetings of the Governor and Mayor were couched in terms characteristic of a state as noted for oratory as for the charm of its blue grass. The feature of the evening was the address of the president in which he spoke of the stupendous importance of the work of hospital executives and startled his audience with the following statement:

"The American Hospital Association represents vast interests. Thousands of lives are constantly in its hands and the value of its property is estimated in billions of dollars. It might be well here to take a minute for reflection on the tremendous importance of the work which we, as hospital executives, are doing. We are spending over a million dollars a day for new buildings and equipment alone. We spend each year a billion dollars in the care of the twelve million people who come to us for aid. In addition to those in our immediate charge there are almost as many more who come to our dispensaries and are represented by our social service departments and clinics. Few organizations have opportunity for contacts so close and so numerous. For in addition to the twenty million sick and injured whom we serve annually in various ways we reach at least sixty million friends and relatives who visit them. That means we have contact with eighty million people each year. Furthermore, the hospitals are educational centers, for we are conducting an elaborate school with branches all over the country. In this school more young women are studying nursing than are enrolled in all our universities and colleges."

A Home for the Association

This convention will go down in the history of the organization as the epochal one at which it was voted to purchase, for the sum of $125,000, a permanent home for the Association in Chicago. This is a property admirably adapted for the constantly expanding work of the organization and ideally situated in East Division Street within ten minutes' walk of both the American Medical Association and the American College of Surgeons. The proposition will be financed in part by the issue of twenty-year, 6 per cent bonds and members are urged to make personal investments out of loyalty and self-interest, and to present the plan to their Boards as a suitable and safe means of investing hospital funds.

Reports

Many of the reports presented by committees at the annual meetings have become a valued part of the reference material of hospital administrators and for this purpose they are published in attractive and convenient form. This year, that of the Committee on Training of Hospital Executives overshadowed all others and although it occupies forty-five pages, the committee naively remarks that "the need for training hospital executives is so apparent that a prolonged report is unnecessary!" Obviously, there is a real need "for the training of superintendents now holding positions, but desiring to increase their usefulness by additional knowledge of those phases of management which were not previously acquired, and second, the adequate training of assistant superintendents aspiring to independent positions, and finally a complete course for those who are desirous of entering the field and who are willing to devote time and money necessary to meet the requirements of the curriculum as outlined by

the educational board of the American Hospital Association."

The report brings out the differences of opinion as to the immediate importance of establishing full university courses and cites at length the plan through which courses are now being offered, for the second year, at Marquette University. In addition, a short course of one week was given in October and a course of one month in April is offered for executives in service.

The immediate demand is obviously for short practical courses, although the ideal of longer courses is one to be adhered to.

The report discusses with great frankness the relative merit of men and women in hospital administration. Says the report:

"The question raised is important and calls attention certainly to the need for additional men in the field of hospital administrators. But fortunately a choice does not have to be made by the training agencies for one reason at least is that (as stated by Dr. Parnall) for the salaries paid for many hospital superintendencies, more intelligence and higher efficiency can be secured in women than in men. Another reason, perhaps, is that in many spheres women have developed extraordinary executive capacity in handling intricate problems, and mixed and numerous personnel. Certainly we should never close the door of opportunity to women, particularly as many are receiving medical training and the educational standard of the nursing profession is rising rapidly. The Catholic hospital furnishes frequently examples of extraordinary executive capacity from women consecrated to the work who seemingly do not have the breadth of experience. Perhaps one other word may be added, so long as the hospital superintendent has no direct responsibility for the treatment of patients, the issue certainly will not be sharp, and the devotion or consecration of many nurses keeps an effective organization."

The report goes on to discuss "The Nurse in Hospital Administration" as follows:

"Undoubtedly, for a long time to come, nurses will be appointed to superintendency in the small hospitals, and less frequently in large hospitals. Under recent educational standards the problem will not be difficult to handle, but a generous policy for persons of maturity and successful experience, who were trained under older educational standards and conditions, will undoubtedly be adopted.

"A College of Hospital Administration will have applications from nurses and must settle these questions related to the curriculum.

"1. What credit will be given to the nurses' training, assuming high school graduation?

"2. Shall the training be on an undergraduate basis, i.e., built upon the nurse's training combined with such academic work as may be prescribed?

"3. Shall it be given on a graduate basis, i.e., wait until the nurse takes at least the equivalent of two years' additional academic training? Occasionally a case will present itself where the applicant, though a nurse, or a laboratory technician, or a dietitian, has not the necessary high school credits. This type of applicant is frequently over twenty-one years of age and may be admitted to the university as an adult special. The new question raised by this type of case, and by administrators who cannot spend the time for a full course, is:

"Shall the university organize a one-year or two-year course leading, not to a degree, but to a certificate of proficiency in hospital administration for such persons?"

Report of Hospital Library and Service Bureau

An intensely interesting report is that of the Hospital Library and Service Bureau because it is the story of a service that goes directly to the desk of any person desiring it. The statement that "nearly two hundred package libraries were furnished for reference work during the course in Nursing Education given at the University of Florida by Blanche Pfefferkorn and a similar course given at the University of Chicago by Laura Logan" is an index of the worth of a service nurses have been slow to appreciate. The circulation of package libraries is unlimited geographically.

Bibliographies on 151 subjects are available and in addition the Bureau has the nucleus of a bibliography on 329 additional subjects. In recognising the concrete worth of this service it is a pleasure to pay tribute, also, to the marvellously friendly spirit in which it is invariably rendered.

Business of the Meeting

The major business of the convention was, of course, that incident to the approval of the plan prepared by the trustees and ably presented by Mr. Borden, for the purchase of the Chicago property already referred to.

National Hospital Day has become so important that it is henceforth to be handled from the central office rather than by a committee as was done last year.

The report of the Nominating Committee with the name of C. J. Cummings of Tacoma for president was accepted and Dr. R. G. Brodrick of San Leandro, California, was nominated from the floor. Mr. Cummings, stating that he was unwilling to compete with another man from the west, withdrew his name. Doctor Brodrick was elected and is therefore President-elect for the coming year while Dr. A. C. Bachmeyer of Cincinnati assumes the responsible position of President. Blanche Fuller, Superintendent of the Methodist Hospital, Omaha, was elected second vice president; she is the only woman member of the Board.

The Social Side

Following a delightful precedent set at Buffalo, a handsomely apparelled company, that taxed the capacity of the Brown Hotel's spacious ballroom, dined and danced on Tuesday night. Among the guests of honor were George C. Potter, Esq., Superintendent Queen's Hospital, Honolulu, Hawaii, and Dr. Foisten Reitz, of Varnamo, Sweden. Doctor Reitz, in conveying a deliciously witty greeting, said that he wished to acknowledge his debt to America because, when he wanted the approval of his Board for improvements, he had only to say, "They do it so in America." The Army, the United States Public Health Service, the College of Surgeons, the Red Cross, the Veteran's Bureau, the American Medical Association were represented at the speakers' table.

Among the representatives of allied organizations who conveyed greetings from the floor was Mary M. Roberts, Editor of *The American Journal of Nursing*, who represented the American Nurses' Association.

Dr. E. R. Palmer, President of the Jefferson County Medical Society, gave a brilliant address on "The Doctor."

Nursing

Nursing was, quite naturally, an element in many of the discussions and all were alert for the discussion of the proposed grading of schools of nursing, a program upon which Mr. Gilmore stated in his presidential address "the whole future of the nursing profession rests." In his report for the Board of Trustees, Richard P. Borden, referring to the grading of schools, said:

"We recognize the enlargement of the sphere of the professional nurse, but we believe that education in special services should follow the fundamental education in the theory and practice of many essential subjects, but we do not believe that the value of the nursing profession may be enhanced by any system which places preliminary education, theoretical training and specialized branches in a class above hospital schools which provide for the training of the bedside nurse in conjunction with the knowledge to be acquired from books and precepts."

The Wednesday night meeting of the Nursing Section was presided over, in her own inimitable fashion, by Sally Johnson. Doctor O'Hanlon reported that he had, as yet, nothing to add to the report on Budgets for Schools of Nursing given last year.

Laura R. Logan presented the paper on Grading Schools of Nursing which we publish in this issue.

Doctor MacEachern, in discussion, said that grading was not to be feared but that it could not be done hastily and the principle was endorsed by most of the other speakers who rose to their feet.

Bertha W. Allen read a most excellent paper on "How Can Schools of Nursing Located away from the Centres of Population Attract Suitable Applicants?" which will appear in the *Journal* in the near future. Miss Allen laid particular stress on the life of the students in the Nurses' Home. Grace Allison, discussing the paper, brought out the point that the experience was not typical, inasmuch as the records of one state show 32 per cent of change in superintendents of nurses in one year. Miss Allison emphasized the importance of the Nursing School Committee in building up the school and keeping it attractive to students.

At this session Janet Geister presented a

paper based on the recent study of "The Nurse in the Dispensary," which was reviewed in the November *Journal;* and Michael Davis, in discussion, hoped for more experimental work in securing educational opportunities for student nurses in dispensaries.

This meeting closed with the election of Grace Allison, Chairman, and Evelyn Wood, Secretary, of the Nursing Section of the A. H. A. for the coming year.

Another nurse who made a definite contribution to the program was Esther J. Tinsley, of Pittston, Pa., who presented before the Small Hospital Section a comprehensive paper on "Community Aspect of the Small Hospital." It was brilliantly discussed by Genevieve Clifford, who also has been conspicuously successful in interesting her community by means of wise and energetic publicity in helping to make the hospital a true center.

Exhibits

The exposition of the A. H. A. is one of its most important features. The one at Louisville was said to represent an expenditure of a half-million of dollars. It was not only extremely attractive, it was truly educational. Indeed, there is no more liberal education in hospital equipment than to go about one of these exhibits with some one who is actually equipping a hospital. Many of the exhibitors sent their technical experts in order that their products might be discussed from every possible angle by those desirous of securing information. The huge, electrically-lighted birthday cake, prepared in honor of the 25th birthday of the *Journal*, under the direction of Alice M. Gaggs of the Norton Memorial Infirmary of Louisville, which was the feature of the *Journal* booth, attracted much favorable comment.

The tremendous area of the main floor of the armory was filled with the technical exhibits while the balcony was devoted to the propaganda exhibits of health and allied organizations.

As usual concurrent meetings were held by the American Occupational Therapy Association, American Association of Hospital Social Workers, Hospital Dietetic Council, and the American Protestant Hospital Association. The latter met at the Seelbach Hotel, October 17-19, adjourning in time for the opening session of the American Hospital Association.

THE AMERICAN PROTESTANT HOSPITAL ASSOCIATION

As is its custom, the Protestant Hospital Association held its annual meeting on the two days preceding the opening date of the American Hospital Association. This association, now five years old, has a membership of 265. The President, Rev. Newton E. Davis, proved a most genial and efficient presiding officer and the meetings were characterized by a rare spirit of fellowship. The program was devoted mainly to consideration of matters of especial interest to denominational hospitals such as "The Best Method of Relating a Denominational Hospital to the Organized Life of the Denomination," "Denominational Responsibility for Standardization," "Why the Protestant Hospital Has a Definite Place in the Hospital Field," and "Denominational Control and Interdenominational Coöperation." A truly classic paper on "The Beginning and Development of the Lutheran Deaconess Hospital Work and Passavant Hospitals in America was presented by Sister Martha Pretzlaff, Superintendent of Passavant Hospital, Pittsburgh.

"The Usual Problem Which Confronts Every Hospital," was a deeply inspirational paper on Hospital Social Service by Louise Renier of the Woman's Hospital, New York, in which she illuminatingly brought out the point that the mainspring of social work is neither ethics nor science, important as both are, but love.

Two hours on Sunday afternoon were devoted to a testimony meeting fittingly opened by Dr. C. S. Wood of St. Luke's, Cleveland, who believes that hospital workers should seek physical, mental, moral and spiritual poise and calm in order that serenity may pervade hospitals. The remainder of the afternoon was devoted to group conferences,

the time was spent by one group in perfecting the constitution and by-laws of the Southern Baptist Hospital Association.

At the session devoted to Nursing Subjects, Cornelia D. Erskine, of the Louisville City Hospital, discussed "What Shall Be Our Future Educational Policy Regarding Nurses Entering Training, and the Grading of Schools by the State?" She again pointed out the indisputable fact that the schools which suffer least from a shortage of students are those making the highest requirements. Miss Erskine believes that the time is ripe for the grading of our schools and that an enlightened public may be depended upon for support of a program which has the good of that same public at heart.

The topic, "Recruiting and Conserving Pupil Nurses Through the Church," emphasized the unusual quality of the machinery available for recruiting, in the form of hospital bulletins, the 110 existing church papers, and the many organized groups of young people and of parents within the churches. Mr. Hahn had enlarged on the history of nursing as it developed from the church, through war, toward its present scientific aspect and the discussion tended to emphasize the point that "the hands of the nurse are blest hands, if they be Christian hands."

Many subjects of general interest came up for discussion such as laboratory equipment, laboratory charges, hospital publicity, and hospital standardization. In the latter discussion, Doctor MacEachern upon request defined "fee-splitting" by saying that "any inducement other than that of merit might be defined as fee-splitting."

At the Saturday night banquet at the Seelbach Hotel, "The Hospital Smile" was briefly discussed and was ably demonstrated by many speakers among the large and friendly group assembled. At Trinity Methodist Church, on Sunday night, Dr. C. C. Jarrell, of Atlanta, preached powerfully on "All Healing Is Divine Healing," saying that the New Testament would be totally wrecked if the records of healing were torn from it.

In sum, it may be said that the convention dealt with gripping ethical and social problems in a constructive fashion which was well exemplified by the speaker who, in discussing the selection of student nurses, said that it was essential "to weed out the unfit in order that they might not mess up the care of the sick for the remainder of their lives."

TWENTY-NINE CENTS FOR HEALTH

You and every other average American spent $10 for candy last year, statistics show; and $9 for education; and $3.50 for police and fire protection; and 75 cents for perfumery; and 50 cents even for chewing gum.

But per capita expenditure for health was a mere 20 cents.

If we can afford to spend $10 per year for candy and gum, why not an equal amount, at least, for health?—From the *Bulletin of the Ohio Public Health Association.*

THE SNEEZER

The Sneezer who sneezes all over others may have a cold in his head, but he hasn't much else there.—From a poster of the Chicago Tuberculosis Institute.

THE JOURNAL INDEX

All requests for the index of Vol. XXV of the *Journal* will be placed on file. Copies of the index will be sent, without charge, as soon as it is ready, to those who have asked for it.

MATERNITY AND INFANCY

Examination of nearly 600,000 infants and preschool children at 26,353 child-health conferences, during the fiscal years 1924 and 1925, was reported to the Children's Bureau of the U. S. Department of Labor by States coöperating under the Federal Maternity and Infancy Act, according to a statement made public here today.

Forty-three States and Hawaii are coöperating under this Act, which provides Federal aid for the promotion of the welfare of mothers and babies, Vermont, Louisiana and Rhode Island having accepted during the fiscal year 1925. States not coöperating are Connecticut, Illinois, Kansas, Maine, and Massachusetts.

NURSING NEWS AND ANNOUNCEMENTS

AMERICAN NURSES' ASSOCIATION

Members of the American Nurses' Association will make their headquarters at Chalfonte-Haddon Hall when the big Biennial is held May 17 to 24, at Atlantic City. Since approximately 900 reservations, only, are obtainable at the hotel, all nurses are asked to write at once to the manager for reservations. Rates are $6 to $8 for single rooms without bath, and $12 to $14 for two in a room. For rooms with bath, the rates are $10 to $12 for single rooms, and $14 to $20 for two in a room. It is hoped that a complete list of the Atlantic City hotels available for the convention, with rates, will be received in time for the January *Journal*.

A tentative program for the 1926 Biennial with recommendations as to the number of sessions, and the manner in which the association will coöperate with other organizations meeting at Atlantic City, will be presented by the Program Committee at the Board meeting in January.

Dr. George E. Vincent, president of the Rockefeller Foundation, is among the speakers on the tentative program of the American Congress of Health with which the American Nurses' Association is coöperating. Doctor Vincent, who will be remembered as one of the outstanding speakers at the 1924 Biennial in Detroit, is to deal with the health section of the League of Nations and with other phases of international health work.

Another number recommended will be a symposium on public health which will be conducted from the standpoint of the lay group, the medical profession, and public health officials, and will include a discussion of the contribution of public health to the welfare of the race.

The week of January 18 is the time set for the annual executive meeting of the Board of Directors of the American Nurses' Association. A meeting of the stockholders of *The American Journal of Nursing* will be held on January 21, for the election of the Board of Directors of the *Journal* for the coming year. Stockholders will be represented by the Board members of the A. N. A.

The Strand has been selected as the headquarters of THE NATIONAL LEAGUE OF NURSING EDUCATION for the biennial national nursing convention held this year in conjunction with the American Health Congress at Atlantic City, N. J., from May 17-22, 1926.

Rates: American plan,—

Rooms Without Private Bath

One person	$ 8.00 to $ 9.00
Two persons	10.00 to 12.00

Rooms With Private Bath

One person	$15.00 to $16.00
Two persons	16.00 to 24.00

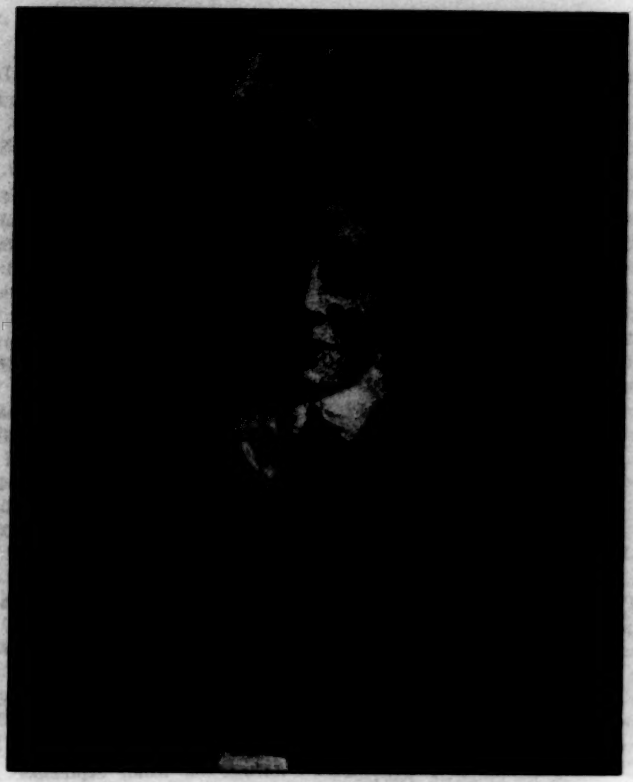
Lists of other boardwalk and avenue hotels near the Strand will be announced later, with rates.

New York will have state headquarters and a field secretary, and will make a state-wide survey on private duty nursing, according to plans made at the big annual convention of the New York Nurses' Association at Albany last month. Among the striking numbers on the program were the addresses of Mrs. Anne L. Hansen, the retiring president, of Alice Shepard Gilman, Secretary of the Board of Nurse Examiners, and the round table on private duty nursing.

New Jersey nurses have already accomplished big things through their permanent state headquarters, reports showed at the semi-annual meeting of the New Jersey State Nurses' Association last month. Excellent descriptions of Helsingfors and a good paper on the central school idea were given during the sessions.

A recent interesting guest at National Nursing Headquarters was Iku Todoriki, Assistant Matron of the Training School of the Central Red Cross Hospital, Tokyo, Japan. (See the item in the Red Cross Department regarding her.) The Japanese nurses hope to form a national organization of nurses before the 1929 meeting of the International Council of Nurses in China.

Another distinguished visitor was Janet Moore who, having completed a course in the International School of Nursing in London, is now observing teaching and nursing methods in this and other countries, preparatory to establishing a department of nursing education in Otago University, Dunedin, New Zealand.



MISS A. LLOYD STILL

Miss A. Lloyd Still, Matron of the Florence Nightingale School of Nursing, St. Thomas Hospital, London, England, has just completed a six weeks' tour of observation of nursing in this country as the guest of the Rockefeller Foundation, which has become interested in nursing education through its tremendous public health program. Bertha Harmer was released by Miss Goodrich from her duties in the Yale School in order that she might accompany Miss Lloyd Still on her tour which, in addition to the Yale School, included visits to New York, Boston, Montreal, Toronto, Washington, Philadelphia and Baltimore. In addition to the professional courtesies shown her, Miss Lloyd Still was everywhere entertained in a fitting manner. In New York, the Foundation gave a delightful luncheon for her at the Hotel Roosevelt which was followed by a tea given at the Central Club by the League of Nursing Education, and a handsome dinner at the Cosmopolitan Club at which Mary Magoun Brown was hostess to a group of nurses distinguished in both nursing school and public health administration. Miss Lloyd Still also addressed the students at Teachers College and was the honor guest at a Faculty Club dinner.

On October 11, the Jewish Hospital School of Nursing, Warsaw, Poland, graduated its first class of 14 nurses,—a modest statement that fails utterly to convey a sense of the effort put into the upbuilding of the school by Amelia Greenwald, its organizer and director. The exercises included an address by John B. Stetson, the United States minister to Poland.

THE MIDDLE ATLANTIC DIVISION

The first Convention of the Middle Atlantic Division of the American Nurses' Association

will be held in Washington, D. C., on December 3 and 4, headquarters at the Washington Hotel.

A reduction of *one and one-half fare on the Certificate Plan* will apply for members attending the meeting, also for dependent members of their families, and the arrangements will apply *from points in New York, New Jersey, Pennsylvania, Delaware and Maryland*. For particulars, apply to the nearest ticket office, but be sure when purchasing a ticket to ask for a certificate. Two hundred and fifty will be needed in order to obtain the reduction.

THE PROGRAM

Thursday, December 3

4:30—6 p. m., Open House with Tea—Graduate Nurses' Association, District of Columbia, National Headquarters of the American Red Cross.

8 p. m., General Session, Mrs. Anne L. Hansen, President of the Middle Atlantic Division, presiding; music; Address of Welcome, Clara D. Noyes, Director, American Red Cross Nursing Service; Survey of Public Health, Dr. Hugh S. Cummings, Surgeon General, United States Public Health Service; New Demands on the Nurse, Grace Abott, Chief of Children's Bureau, U. S. Department of Labor.

Friday, December 4, 1925

9:30—11:45 a. m., General Session, Mrs. Anne L. Hansen presiding. National and International Problems of Nursing, Adda Eldredge, President, American Nurses' Association; Mental Health, Dr. Loren B. Johnson, Washington, D. C.; Some Reasons for Including Instruction in the Nursing of Mental Diseases in the Curriculum, Harriet Bailey, State Department of Education, Albany, N. Y.; Mental Hygiene in Crime Prevention, Dr. William A. White, Superintendent of the St. Elizabeth's Hospital, Washington, D. C.

12—1 p. m.—Reception at the White House.

2—3:30 p. m.—Round tables. The Nursing Personnel of Reserve Medical Units, The Relation of the Local Committees of the American Red Cross in Relation to These Units, Blanche Rulon, Captain, A.N.C., Office of the Surgeon General, Washington, D. C., and Ida F. Butler, Assistant to the Director, American Red Cross Nursing Service; Private Duty Nursing, Helen F. Greaney, Philadelphia, Pa.; Methods of Educating the Student Nurse, Ruth I. Taylor, Instructor, Army School of Nursing, Army Medical Center, Washington, D. C.

3:30—6:30 p. m.—Reserved for Sightseeing.

7:30 p. m.—Banquet at the Washington Hotel, Major Julia C. Stimson, Superintendent of the Army Nurse Corps and President of the League of Nursing Education, Washington, D. C., presiding.

Address, Dr. Thomas A. Groover, President of the Medical Association of the District of Columbia, Washington, D. C.; The Nurse a Citizen, Annie W. Goodrich, Dean, Yale University School of Nursing, New Haven, Conn.; The Layman's Responsibility in an Adequate Program for City Health, Dr. Haven Emerson, Dean, Department of Public Health and Hygiene, Columbia University, New York.

Saturday, December 5, 1925

3—5 p. m.—Open House at the Washington Hospitals, fourteen in number. The names and location of the hospitals will be printed on the program.

NURSES' RELIEF FUND

REPORT FOR OCTOBER, 1925

Balance on hand, September 31, 1925	$21,175.03
Interest on bonds	383.38
Interest on bank balance	25.42

Receipts

California: Dist. 1, Alameda County, Fabiola Hospital Alumnae Assn., $13; Dist. 13, Santa Cruz County, $4; Dist. 14, Butte County, $19	36.00
Florida: State Nurses' Association	23.50
Georgia: Dist. 1, $25; Georgia State Assn. of Graduate Nurses, $50; one individual, $5	80.00
Iowa: Dist. 1, $169; Dist. 2, $26; Dist. 3, $29; Dist. 5, $53; Dist. 6, $100; Dist. 7, $21; Dist. 9, $47.50; Dist. 10, $20	465.50
Kansas: State Nurses' Assn., $63; Dist. 1, $29; Dist. 5, $59; Dist. 6, $3	154.50
Maine: State Nurses' Assn., $100; Western District, $10; Maine	

Eye and Ear Infirmary Alumnae Assn., $25; two individuals, $8,	143.00
Maryland: Maryland General Hosp. Alum. Assn., Baltimore...	29.00
Minnesota: Dist. 2, St. Luke's Hosp. Alum. Assn., $52; St. Mary's Hosp. Alum. Assn., $7; one individual, $1; Dist. 3—Northwestern Hosp. Alum. Assn., $2; University Hosp. Alum. Assn., $1; Abbott Hosp. Alum. Assn., $4; Fairview Hosp. Alum. Assn., $55; one individual, $2; Dist. 4; Ancker Hosp. Alum. Assn., St. Paul, $60; Dist. 5, two individuals, $3----------	187.00
Missouri: Bethesda Hosp. Nurses' Alum. Assn., St. Louis, $10; Research Hosp. Nurses' Alum. Assn., Kansas City, $60; Children's Mercy Hosp., Nurses' Alum., Kansas City, $12; Grace Hosp., Nurses' Alum. Assn., Kansas City, $11; University Hosp. Nurses' Alum. Assn., Kansas City, $29; St. Joseph's Hosp. Nurses' Alum. Assn., St. Joseph, $2; Dist. 6, Kirksville, $15.50; Dist. 7, two individual members, $2; a friend, $2------	143.50
New York: Collection at State Meeting in Albany, $356.25; Dist. 2, three individuals, $3; Dist. 3, $25; Dist. 4, student body of Auburn City Hosp., $10; Nurses' Alum. of Auburn City Hosp., $55; Syracuse Memorial Hosp. Alum. Assn., $168; individual member, $5; Dist. 5, Ithaca City Hospital Nurses' Alum. Assn., $10; Cortland County Hosp. Nurses' Alum. Assn., $35; Dist. 7, Rome Hosp. Student's Council, $10; Dist. 9, Saratoga Springs Hosp. Alum. Assn., $15; Troy Hosp. Students' Body, $75; Dist. 10, Amsterdam City Hosp. Nurses' Alum. Assn., $25; Dist. 13, two individuals, $3; Commissions on American Journal of Nursing subscriptions, $9; Presbyterian Hosp. Nurses' Alum. Assn., $100; New York Hosp. Student Body, $25; Dist. 14, one individual, $5----	934.25
North Carolina: Dist. 2, Winston-Salem ----------	61.00
Pennsylvania: Memorial Hospital Alum. Assn., Roxborough, Phila., $25; from a patient, through Visiting Nurse Association, York, $1,	26.00
Tennessee: Dist. 1, Memphis----	146.00
West Virginia: State Nurses' Association ----------	200.00
Wisconsin: Madison General Hosp. Alum. Assn., Madison, $50; Mercy Hosp. Alum. Assn., Janesville, $10; St. Francis Hosp. Alum. Assn., La Crosse, $9; one individual, $5 ----------	74.00
Protest fees paid in September refunded ----------	1.00
Total receipts----------	$24,288.08

Disbursements

Paid to 80 applicants-----	$1,205.00	
Exchange on checks------	.30	
Postage and supplies for chairman ----------	10.00	
Interest received on American Nurses Association Nurses' Relief Fund Savings Account, left in that account ---------	25.42	
Total disbursements----------		1,240.72
Balance on hand, October 31, 1925-		$23,047.36
Balance in American Nurses' Association Nurses' Relief Fund Savings Account ----------		5,088.60
Invested funds----------		83,531.14
		$111,667.10

All contributions to the Nurses' Relief Fund should be made payable to the Nurses' Relief Fund and sent to the State Chairman. She, in turn, will mail the checks to the American Nurses' Association, 370 Seventh Avenue, New York, N. Y. If the address of the Chairman of the State Committee on the Relief Fund is not known, then mail the checks to the Headquarters office of the American Nurses' Association, 370 Seventh Avenue, New York, N. Y. Requests for leaflets

should be sent to the Director at the same address. For application blanks for beneficiaries and other information, address Elizabeth E. Golding, Chairman, 317 West 45th Street, New York, N. Y.

THE ISABEL HAMPTON ROBB MEMORIAL FUND

REPORT TO NOVEMBER 10, 1925

Previously acknowledged	$30,093.94
Receipts	
Minnesota: Registered Nurses' Assn.	50.00
Total	$30,143.94

THE McISAAC LOAN FUND

REPORT TO NOVEMBER 10, 1925

Balance, October 10	$466.79
Receipts	
Minnesota: State Registered Nurses' Assn.	50.00
Balance	$516.79

MARY M. RIDDLE,
Treasurer.

Contributions to these two funds are solicted from nursing organizations and from individuals. Checks should be made out separately to Mary M. Riddle, Treasurer, and sent to her in care of *The American Journal of Nursing*, 19 West Main Street, Rochester, N. Y.

ARMY NURSE CORPS

During the month of October, 1925, the following named members of the Army Nurse Corps were transferred to the stations indicated: To Station Hospital, Fort Banks, Mass., 1st Lieut. Elida Raffensperger; to Station Hospital, Fort Bragg, N. C., 2nd Lieut. Esther Klain; to Fitzsimons General Hospital, Denver, Colo., 2nd Lieuts. Clara Swenson, Anna A. Valor, Maud Quinn; to Station Hospital, Fort Leavenworth, Kans., 1st Lieut. Della Hurley, 2nd Lieut. Hilda Kangas; to Letterman General Hospital, San Francisco, Calif., 2nd Lieuts. Laura C. Heston, Ruby E. Nichols, Lilly A. Anderson, Vera L. Wagner, Inez L. Strom; to Station Hospital, Camp Lewis, Wash., 2nd Lieut. Mary E. Mellor; to Station Hospital, Fort McPherson, Ga., 1st Lieut. Florence A. Blanchfield, 2nd Lieut. Anna Claypoole; to Station Hospital, Fort Sheridan, Ill., 2nd Lieuts. Evelyn Hardy, Mary Miller; to Walter Reed General Hospital, Wash., D. C., 2nd Lieut. Lena L. Ballard; to the Hawaiian Department, 2nd Lieuts. Nettie R. Jenkins, Ella Huey; to the Philippine Department, 1st Lieut. Edna M. Rockafellow, 2nd Lieut. Caroline M. Myers.

Eighteen have been admitted to the Corps as 2nd Lieuts.

The following named, previously reported separated from the service, have been re-assigned: To Fitzsimons General Hospital, Evona M. Shostrom, Mildred Michaels; to Walter Reed General Hospital, Esther A. Stephens.

The following named are now under orders for separation from the Army Nurse Corps: Helena Austin, Pearl A. Buss, Anna P. Dillon, Etta Dunheiser, Mary Dunlap, Genenia F. Flemister, Kathryn M. Greene, S. Eleanor Grehea, Anna Gudelsky, Icafeen Hanna, Noama E. Hussey, Velma Johnson, Glynn Jones, Carmen M. Laurisch, Hilma Lindell, Margaret H. Meredith, Lucy Morris, Della M. Robertson, Margaret Shea, Kathryn M. Skinner, Sallye E. Wailes, Blanche E. Wheatley, Cecelia Wensing, Harriett N. Willett and Rose E. Yates.

JULIA C. STIMSON,
Major, Superintendent, Army Nurse Corps.

NAVY NURSE CORPS

REPORT FOR OCTOBER

Appointments: Eleven.

Transfers: To Annapolis, Md., Sue H. Rubincam; to Charleston, S. C., Allene M. Templeton; to League Island, Pa., Ada L. Wood, Rosa L. Lane, Katherine M. Gallagher, Chief Nurse, Barbara F. Egenreider; to Mare Island, Calif., Frances L. Winkler, Chief Nurse, Dema V. Leopold, Irene M. Lannon, Myrtle I. Carver; to New London, Conn., Mina A. King, Chief Nurse; to New York, N. Y., Caroline V. Graham, Ruth E. Martin, Lillian A. Johnson; to Norfolk, Va., Cornelia A. Armstrong; to Pearl Harbor, T. H., Ellen M. Hodgson, Chief Nurse, Isabella Gilfillan; to Puget Sound, Washington, Laura M. Nygren; to Quantico, Va., Elizabeth S. Leonhardt, Chief Nurse; to San Diego, Calif.,

Marie-Louise Breingan, Ruby Russell, Chief Nurse; to St. Thomas, V. I., Anne K. Harkins, Chief Nurse; to Tutuila, Samoa, Isabella F. Erskine, Chief Nurse, Stella Terrill; to U.S.S. Relief, Mildred R. Beat, Helen Rein, Marjorie L. Adams, Sallie L. Vestal; to Washington, D. C., Jutta J. Anderson, Estelle I. Williams.

Honorable Discharge: Ina Belle Wilson.

Resignation: Kathleen Fitzsimmons, Helen M. Schuweiller, Doris M. Butler, Jennie Sanford, Margaret B. Rooney.

J. Beatrice Bowman, Superintendent, Navy Nurse Corps left on the "U.S.S. Henderson" on October 20, for an official trip to the west coast in the interest of the Nurse Corps. She visited the Naval Hospital and the Pharmacist's Mates' School at Norfolk, Va., on her way out, also the Field Hospital at Port au Prince, Haiti. On the West Coast, Miss Bowman will visit the Naval Hospitals at San Diego, Mare Island and Puget Sound, the Hospital Corps Training School at Mare Island and the Hospital Ship "Relief." She will return to the Bureau of Medicine and Surgery on the "Henderson" about December 10.

J. Beatrice Bowman,
Superintendent, Navy Nurse Corps.

U. S. PUBLIC HEALTH SERVICE NURSE CORPS

Report for October, 1925

Transfers: To Pittsburgh, Pa., Hattie Thiedemann, Mary Schappaccher; to Boston, Mass., Helene Bonner; to Buffalo, N. Y., Mary McLarney, Alice Brice, Freda Stilli; to San Francisco, Calif., Emma Kincannon; to Stapleton, N. Y., Anna Kollander; to Norfolk, Va., Julia Fisher.

Reinstatements: Grace Watson, Lola Neal, Anna Svensson, Elizabeth Connors.

New Assignments: Harriet Small, Daisy M. Mount, Rubie M. Cox, Nan Disert, Antoinette Kozel, Eva Colyer, Marguerite Reverdy, Florence Wilson.

It is with the deepest regret that the death of Mary McSweeney, a Chief Nurse in the U. S. Public Health Service, is reported. Miss McSweeney was born in Ireland. She graduated from the Medfield Training School, Medfield, Mass., and took a postgraduate course at the Polyclinic Hospital, New York. She served in the Army from October, 1918, until July, 1919, and entered the Public Health Service as the first psychiatric follow-up nurse in the Office of the District Supervisor of the Fourth District in Washington, D. C. She served as Assistant Chief Nurse at U. S. Public Health Service Hospital, Bronx, New York, (now a Veterans' Hospital), was transferred to St. Louis, Mo., as Chief Nurse, and has served in that capacity at Cleveland, Ohio; Boston, Mass. and Key West, Fla. The Service feels that in the loss of Miss McSweeney it has suffered the loss of a loyal and efficient member of the Corps.

Lucy Minnigerode,
Supt. of Nurses, U.S.P.H.S.

U. S. VETERANS' BUREAU NURSING SERVICE

Report for October

Assignments: 70.

Transfers: To Oteen, N. C., Martha Schmidt; to Ft. Thomas, Ky., Sylvia E. Dunning; to Sheridan, Wyo., Lillian Mahin; to Aspinwall, Pa., Blanche Durbin, Cora Bouley, Rachael Goldgar, Adelaide Curley; to Atlanta, Ga., May Nugent; to Ft. Lyon, Colo., Olive W. Burns, Lorena Mevert; to Legion, Tex., Evelyn Nelson, Leota Eberl; to Prescott, Ariz., Jean Sharpe; to Outwood, Ky., Ada Finley; to Erie, Pa., Regional office, Mary West; to Rutland, Mass., Mary E. Hunt, Rebecca A. Wade; to St. Paul, Minn., Rose Dunn.

Mary A. Hickey,
Superintendent of Nurses.

The Spanish-American War Nurses held their twenty-fourth annual meeting in St. Petersburg, Florida, September 27-October 1, meeting at the same time and place as the U.S.W.N. and the National Auxiliary. By unanimous consent it was decided to meet with the same organizations next year in Des Moines, Iowa. Cora E. Taylor, President, called to order the twenty-one members who assembled at Headquarters, the Hotel Florenton, where the business sessions were held. Much important business was transacted, officers elected, and committees appointed. There was the usual joint meeting of the U.S.W.N., National Auxiliary and nurses, greetings received and extended, a memorial meeting, the grand march and ball, sightseeing trips both

on land, and on beautiful Tampa Bay, and the trip to Cuba. The people of St. Petersburg gave a "key that opened every door", and the thousands of visitors proved it true.

THE AMERICAN ASSOCIATION OF CHILDREN'S HOSPITALS was formally organized at Indianapolis, Ind., October 24. Robert E. Neff, Administrator of the Robert W. Long Hospital and the James Whitcomb Riley Hospital for Children, was elected president and Bena M. Henderson, Superintendent of the Milwaukee Children's Hospital, became Secretary-treasurer. The all-day session at the Riley Hospital included a round table at which some of the problems peculiar to Children's Hospitals were discussed; and Clinics were held by Dr. Isaac Abt, professor of diseases of children, Northwestern University, Chicago, and Dr. Vilray P. Blair, associate professor of clinical surgery, Washington University School of Medicine, St. Louis.

At the MISSISSIPPI VALLEY CONFERENCE ON TUBERCULOSIS, held recently in Lansing, Mich., which was attended by many doctors, nurses, and other health workers, it was voted to hold the next annual conference in Chicago, in June, 1926.

STATE NEWS

Alabama: THE STATE NURSES' ASSOCIATION for Alabama has elected the following officers for the year: Presdient, Annie May Beddow; vice presidents, Zoe LaForge, Linna H. Denny; secretary, Grace Hoerig; treasurer, Ruth Ravis, all of Birmingham. League officers are: President, Mrs. Ida S. Inscor, Dothan; secretary, Helen McLean, Jasper.

Arkansas: THE ARKANSAS STATE NURSES' ASSOCIATION held its thirteenth annual meeting at the Randolph Hotel, El Dorado, October 15-16. Eva Atwood, president, presided. Invocation by Rev. P. Dudley. Hon. Archie Murphy, Mayor of El Dorado, welcomed the nurses; the Union Medical Society sent a hearty and welcoming message which was greatly appreciated by all the nurses. Ruth Riley, Fayetteville, secretary and treasurer of the State Board of Nurse Examiners, gave a talk on statistics of the examining board. Dr. D. E. White, of El Dorado, mentioned in his address, the great and humane work accomplished by nurses, comparing the services of the physician and the nurse, closing his address by saying that he wished always to be considered a big booster for the Arkansas State Nurses Association. Eva Atwood, president, in her address gave many good points as to loyalty and coöperation. This was followed by an address by Frances Brink, secretary of the National Organization for Public Health Nursing, after which the morning session adjourned. A delightful luncheon was given by the Lions Club. At 2 p. m., the meeting was again called to order and a very interesting address was given by Lillian White, Field Secretary of the A. N. A., whom the association was very fortunate to have present. Reports were given by the secretary and treasurer and state committees, after which Marie McKay read a paper, Nursing Progress, written by Sister M. Bridget, of Little Rock. A talk on Nursing Education, by H. C. Givens, State Department of Education, followed. The remainder of the afternoon was turned over to the State Private Duty Section, at which Lula McCarver, of Little Rock, presided. At 6 p. m., those interested in the training of nurses and in institutional work, met with Mr. Given. An elaborate banquet was given at the Randolph Hotel by the nurses of District 7, and later, the American Legion Roy V. Kinard Post No. 10 gave a very entertaining dance. At the morning session, October 16, the invocation was by Rev. F. Rorie. An interesting address was given by Major O. L. Bodenheimer, after which an instructive talk was given by Dr. H. H. Neihuss. At the close of the morning session a delicious luncheon was given by the Warner Brown Hospital. At the afternoon session an address by Dr. F. C. Mahoney, county health officer, was followed by a short talk on Red Cross Nursing, by Lillian White. Officers are: President, Mrs. Maud Teasdale, Little Rock; vice presidents, Marie McKay, Little Rock; Rachel Buffalo, Hot Springs; secretary, Blanche Tomaszewska, Pine Bluff; treasurer, Lillian Atwood, Little Rock. A vote of appreciation was extended to Miss Atwood. After a ride to the Oil Fields, the meetings adjourned. The next meeting will be in Fayetteville, November 1 and 2, 1926.

California: The Board of Directors of the CALIFORNIA STATE NURSES' ASSOCIATION, held its quarterly meeting in Long Beach,

October 7, S. Gotea Dozier, presiding. The Committee on Legislation urged that all nurses be urged to register and vote intelligently at all elections; that the various districts take up an intensive study of some of the legislative bills that affect women, which will come before the voters in the next two years. The report of the Finance Committee showed that the present dues of 50 cents per capita are inadequate and it was decided to recommend provision for an increase to the Committee on Revision. Plans were outlined for the next state convention to be held at Long Beach, and the date was decided upon as the week beginning June 28. A better organization and management of registries was advised. **San Francisco.**—Lisle Freligh, for many years night supervisor of nurses at Cook County Hospital, Chicago, and who spent last year at Teachers College, New York, has accepted the position of Director of Nursing at the San Francisco Hospital. Naomi Deutsch, who has held various positions in the Henry Street Nursing Service, is organizing the San Francisco Visiting Nurse Association. THE NORTHERN BRANCH OF THE CALIFORNIA LEAGUE is sponsoring two courses of Senior Students' Vocational Conferences, one at Berkeley and one at the Stanford University School of Nursing.

Connecticut: New Haven. — Gertrude Hodgman, for several years Educational Secretary of the National Organization for Public Health Nursing, has joined the faculty of the Yale University School of Nursing. Eunice A. Smith, former Superintendent of Nurses at the Rochester General Hospital, Rochester, N. Y., has accepted the superintendency of Grace Hospital. Miss Smith has just received the degree of Bachelor of Science at Columbia University, where she has been studying for the past year. Priscilla Humphrey and Jessie L. McGregor, students at the Rochester General Hospital School of Nursing, have resigned to enter the Yale School of Nursing in New Haven. **New London.**—THE LAWRENCE AND MEMORIAL ASSOCIATED HOSPITALS held graduating exercises for a class of 16, October 9, at Plant Hall, Frederic W. Mercer, President of the Board of Trustees, presiding. The invocation was by Rev. Charles E. Spaulding. The address was given by Annie W. Goodrich, Dean of Yale School of Nursing; diplomas were awarded by the President of the Board of Trustees, the school pins and companion cases were presented by Mrs. Maurice E. Sherman, vice president of the Woman's Auxiliary. She also announced that Mildred Golding would receive the scholarship of $300 for postgraduate study. A reception and dance closed the evening. **Waterbury.**—Harriet Gregory, assisted by Caroline A. Strong and Alice H. Tuttle has established a Convalescent Home in an attractive building where both adults and children can be cared for.

District of Columbia: An unusually well attended meeting of the LEAGUE OF NURSING EDUCATION was held in the Nurses' Recreation House, Walter Reed General Hospital, on October 29. The Constitution and By-Laws in accordance with the suggestions from the National League were presented for discussion and voted upon. THE CENTRAL SCHOOL OF NURSING opened October 5, with 135 students enrolled for the first semester. Subjects included in the curriculum are Chemistry, Hygiene, Pediatrics, Bacteriology, Ethics and Psychology. Other subjects will be added as space is provided.

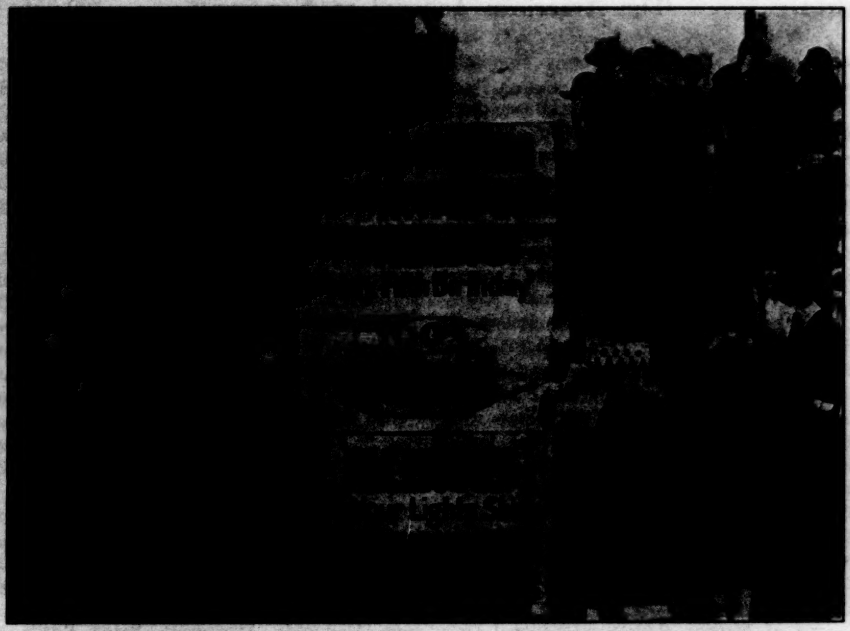
Georgia: Augusta. — THE SECOND DISTRICT ASSOCIATION held its annual meeting on October 14, at which the following officers were elected: President, E. Alma Brown; vice president, Mrs. Margaret Murphy; treasurer, Margaret Dorn; secretary, Harriet White. THE SECOND DISTRICT ASSOCIATION held a meeting recently which was most interesting. Mrs. W. N. Benton, a prominent club woman, spoke on Parliamentary Law. An examination for state registration was held at the University Hospital in November at which there were fourteen applicants, five being colored nurses.

Illinois: The twenty-fourth annual meeting of the ILLINOIS STATE ASSOCIATION OF GRADUATE NURSES was held in Springfield, on October 13, 14 and 15. The meeting was opened by the board of directors at the Leland Hotel on the evening of October 12 with every district represented and only two of the chairmen of the standing committees absent. All the meetings were held in the new Continental Building and were very well attended. Over three hundred graduate nurses were registered and twenty-eight student

nurses. Emily Sargent, superintendent of the Visiting Nurses' Association, Detroit, gave a very inspiring message from the nurses of Michigan on the opening morning. Dr. Eva M. Wilson, Manhattan, gave a helpful discussion on the nurse and her relation to the rural community. Her enthusiasm and inspiring remarks made the nurse feel that rural nursing was one of the greatest opportunities for the trained woman. The PRIVATE DUTY SECTION gave a very good program which was rendered almost entirely by nurses doing private duty. The speakers not connected with the state organization, were Dr. Robert A. Black of Loyola University, who gave a paper on The Nurse in Pediatric Nursing. Clara Weiler, of Milwaukee, gave a discussion on Student Self Government. The PUBLIC HEALTH SECTION had charge of the program on Wednesday morning, October 14, with Mabel McClenahan, chairman of the section, presiding. The discussions were on public health topics. An interesting demonstration of accident prevention and first aid was given by the first aid teams from the North Shore and Milwaukee Railway. Evelyn Wood, president of the Illinois League of Nursing Education, conducted the program on Wednesday afternoon, October 14. The principal feature was a round table discussion by Ada Belle McCleery, of Evanston, consisting of five-minute discussions on the following subjects: Who Shall Teach Chemistry and Bacteriology in the Schools of Nursing? How Many Hours of Teaching per Week Should We Require of Our Instructors? How Many Subjects Should the Nurse Instructor Be Expected to Teach? Would It Be Advisable To Include a Course in English in Our Curriculum? What Is the Value of an Affiliated Course to Students in Affiliating Hospitals? Should Every Hospital Maintain a School of Nursing? What Is the Educational Value of Postgraduate Courses as Usually Offered in Hospitals? What Extra-Curriculum Activities Should We Offer Our Students? How Can We Inspire and Preserve Higher Ideals of Service in Our Students? The lively discussions of these various topics fully demonstrated that they were subjects in which nurses are vitally concerned at the present time. At the end of this session the nurses visited the tomb of Abraham Lincoln and in behalf of the State Association, Sarah B. Place, the President, placed a wreath on the tomb. The closing session was held on Thursday, October 15, when papers of general interest were discussed and the following officers were elected: President, Sarah B. Place, Chicago; vice presidents, Alice Dalby, Springfield, and Mary Cutler, Chicago; secretary, May Kennedy, Chicago; treasurer, Elizabeth Asseltine, Chicago. The next annual meeting, which will be the twenty-fifth, will be held in Chicago. **Chicago.** — Anna D. Wolf has accepted the position of Superintendent of Nurses of the new Albert Billings Memorial Hospital, Chicago University. Miss Wolf returned last spring from China where she had for six years been Superintendent of Nurses at the Peking Union Medical College.

Indiana: THE INDIANA NURSES' ASSOCIATION held its annual meeting on October 2-3, at Fort Wayne. At the election of officers, Lizzie Goeppinger, Crawfordsville, was reëlected president; vice presidents, Anna M. Holtman, Fort Wayne, Fannie Thomas, Rochester; secretary, Elizabeth Pitman, Indianapolis; treasurer, Elma Thompson, Indianapolis. Ina M. Gaskill, Indianapolis, gave a report of the meetings of the International Council of Nurses, in Helsingfors, Finland. **Indianapolis.** — THE INDIANA UNIVERSITY NURSES' ALUMNAE gave a breakfast at the Keenan Hotel, Fort Wayne, October 3, to the Alumnae who were attending the State Convention. The members of the Alumnae who were attending the Teachers' Institute in Indianapolis, were entertained at Riley Hospital by the Alumnae at a special meeting, October 23. Many out of town nurses were present and interesting letters from others, stating the nature of their work, were read. Wilkie Hughes, class of 1920, who for the past five years has been teacher of hygiene at Technical High School, of Indianapolis, has been granted a leave of absence and is getting her Master's Degree at Teachers College, New York City.

Iowa: THE IOWA STATE NURSES' ASSOCIATION held its twenty-second annual meeting in Davenport, October 19-22, the best it has ever held. The nurses of Davenport and Sixth District outdid themselves in providing for the comfort and pleasure of the guests and there was not a dull minute in the program.



CELEBRATION OF THE JOURNAL'S BIRTHDAY AT THE ILLINOIS STATE MEETING
(Part of the group on each side is cut off through lack of space)

The League of Nursing Education held an all-day session on October 19 preceding the opening of the convention proper. The Red Cross nurses of the state convened the same day for a separate meeting. The outstanding features of the program were the addresses of Blanche Pfefferkorn, Executive Secretary of the National League; Helen Greaney, chairman of the A. N. A. Private Duty Section; Judge Harry Olson, chief justice of the Chicago Municipal Court; and the report of the International Council meeting at Helsingfors by the retiring president, Adah L. Hershey of Des Moines. In addition to these speakers there were numerous papers and addresses by distinguished members of the medical profession, nurses and laymen. Various social features enlivened the convention. Chief among these was the banquet and program on the evening of October 21 in the Gold Room of Hotel Blackhawk. The program was varied and a large part of it was supplied by the pupil nurses of Davenport and Clinton Hospitals. Each district delegation contributed some sort of stunt and these were original and clever. Following the banquet the floor was cleared and some of the Davenport graduate nurses put on a marching drill. Later the guests enjoyed dancing. Mercy Hospital Sisters held an "at home" for the visitors during the meeting and the delegates were also entertained at a tea at the Red Cross rooms in Moline, following an automobile ride about the tri-cities and a tour of the arsenal at Rock Island. Membership of the Iowa Association is larger than it has ever been and the reports show that its financial condition is excellent. It was decided to direct every possible effort toward the maintaining of an executive secretary and establishing state headquarters as soon as possible. Officers elected were: President, Nelle R. Morris, Summit Apartments, Iowa City; vice presidents, Margaret Stoddard, Mount Pleasant, and Grace Van Evera, Davenport; secretary, Maude R. Sutton, Park Hospital, Mason City; treasurer, Margaret Henke, 923 Franklin Street, Keokuk. League of Nursing Education, President, Esther Jackson, Lutheran Hospital, Des Moines;

secretary, Lola Lindsay, University Hospital, Iowa City.

Kansas: The Kansas State Board for Examination and Registration of Nurses will hold an examination for State Registration in the State House, Topeka, December 29-30, 1925. Applications for this examination should be filed at least three weeks prior to the examination with the Secretary of the Board, M. Helena Hafley, 961 Brooks Avenue, Topeka. The Kansas State Nurses' Association held its fourteenth annual meeting at Hotel Kansan, Topeka, October 8-10. The program proper began with a banquet on the roof garden of the hotel. Mrs. Charles C. Bailey, president, presided. The program was under the direction of Sister Catherine Voth. Invocation, Rt. Rev. Monsignor P. McIrnerney; Address of welcome, Honorable Ben S. Paulen, governor of Kansas, to which Mrs. Dorothy Jackson, Asbury Hospital, Salina, responded. Some of the speakers were: Laura R. Logan, Illinois Training School, Chicago; representatives of the National League of Nursing Education, National Organization for Public Health Nursing. Mrs. Elizabeth Vaughn, St. Louis, Mo., spoke on the American Red Cross. Others who spoke during the meetings were: Prof. W. A. Irwin, Washburn College; Jean S. Young, Kansas City Agricultural College, Manhattan; Dr. Earl G. Brown, Secretary of the Kansas State Board of Health, on the control of cancer. About fifty nurses visited the Menninger Psychiatric Hospital. The following officers were elected: President, Mrs. Charles C. Bailey, Topeka; vice presidents, Mrs. R. D. Montgomery, Pearl Lapstead; secretary, Caroline E. Barkemeyer, Halstead; treasurer, Esther Sullivan. Mrs. Ben S. Paulen entertained with a tea, at the executive mansion, in compliment to the visiting women who attended the meetings.

Louisiana: The Louisiana State Nurses' Association held a convention in Alexandria, October 28-29. The delegates registered at the City Hall, where all meetings were held. The executive meeting was held at Bentley Hotel. Invocation, Rev. C. Van de Ven, Bishop of Alexandria; address of welcome, Dr. P. K. Rand, Alexandria; Mrs. Lydia Breaux, president, presided. Julia Tebo, secretary of the State Board, stated in her report, that there are now 2,345 registered nurses in the state and nineteen accredited training schools. Several interesting papers were read: The Louisiana League of Nursing Education, by Sister Kosta, New Orleans; Public Health Nursing, Katherine Felton; Coöperation, Mrs. Ethel Marsh; The American Red Cross, Maud Reid; Anesthesia and Analgesia, Dr. D. C. McBride. A reception was held in the evening in the form of a Hallowe'en party, at which dancing was enjoyed. One of the vital points stressed during the second day was, that the outgoing president become an ex-officio member of the Board of Councilors and that the president be a delegate to the American Nurses' Association convention during her first year in office, an alternate to be appointed the second year, also that every alternate meeting of the State Association be held in New Orleans. A round table discussion was introduced by M. Gravel on the subjects: With the Public, With the Hospitals, With the Doctors, With the Register, With the Association. This subject was discussed by nurses from Alexandria, Shreveport, Baton Rouge, Lake Charles and New Orleans. Other papers read were: The Work the Register Is Doing, Mrs. B. B. Watson, Shreveport; The Value of the *Journal* in the Training School, Mrs. J. I. Peters, Alexandria; The Value of the *Journal* in Rural Districts, Cave Wilson, Shreveport; The Value of the *Journal* to the Private Duty Nurse, Cornelia Gravel, Alexandria; The Ideal Nurse, Miss Thorp, Lake Charles; A Paper by Miss Claiborne was read by Miss Broussard. The meeting adjourned for lunch at the Bentley Hotel and a ride around the city. During the afternoon session, Dr. L. D. Gremillion spoke on the Relation of the Nurse to Public Health; A Message from the Federated Clubs, Mrs. C. C. Rougeou, Alexandria; The Graduate Nurse in the X-Ray Laboratory, Grady Acker, Shreveport. The following officers were elected for a term of two years: President, Geneva Peters, Shreveport; vice presidents, Mrs. Clara McDonald, M. Mac Gachen; secretary, Fay Trammel, Shreveport; treasurer, Mrs. Ethel B. Marsh, Alexandria; councilors, Mrs. Lydia Breaux, Cornelia Gravel, Maud Reid. Chairmen of committees are: Credential, Mrs. J. I. Peters; Legislative, Julia Tebo; Program, Hugh Burch; Publication and Press, Mrs. Clara Block;

Nominating, D. Matchauer; Nurses' Relief Fund, M. McKendrick. Officers of the League of Nursing Education are: President, Anna Smith, Lady of the Lake Hospital, Baton Rouge; vice president, Daisy Rose, New Orleans; secretary-treasurer, Margaret Price, Hotel Dieu, New Orleans.

Maryland: Baltimore.—The University of Maryland Nurses' Alumnae Association held its first meeting after the summer recess, October 6, in the Louise Parsons Home. It was decided to give a subscription card party to help defray the subscribed fee of $3,000, the Association's share in the addition to the new Nurses' Home. It is planned to start, at once, an addition of forty rooms to take care of some of the probationers who entered the September class.

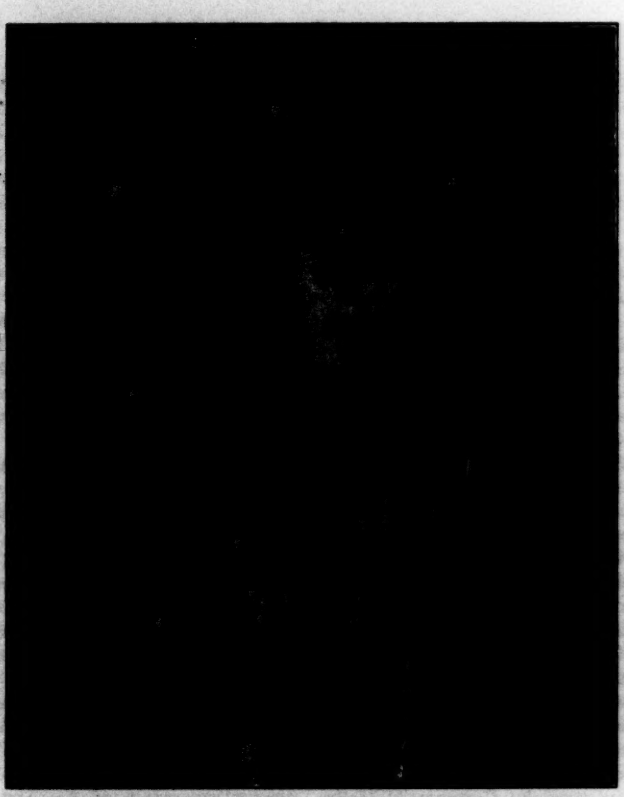
Massachusetts: Boston.—The New England Industrial Nurses' Association held a meeting on October 10, in the Town Room Library, with John Calder of the Royal River Manufacturing and Power Company as speaker, his subject being, The World We Live In. The next regular meeting was held on November 14, when Dr. J. W. Courtney of Boston spoke on The Neurotic in Industry. Doctor Courtney is an eminent neurologist and a writer and lecturer of note. **Westborough.**—The regular fall meeting of the Westborough State Hospital Nurses' Alumnae Association was held at the Hospital, October 6. A balance of $503 in the Benefit Fund was announced by the treasurer, enabling the association to help its sick members from now on. Following the meeting, the members were guests of Doctor Land at the graduation exercises, luncheon and dance. **Westfield.**—The Noble Hospital Alumnae Association held a special meeting at which Helen Hazen was elected treasurer. Ann R. Austin has resigned after eight years of loyal service to the alumnae.

Michigan: The Michigan State Nurses' Association has as officers for 1925-1926: President, Mary A. Welsh, Blodgett Memorial Hospital Grand Rapids; vice presidents, Emily Sargent, Marie Brown; general secretary, Mary C. Wheeler, 4708 Brush Street, Detroit; recording secretary, Mrs. P. E. Wright; corresponding secretary, Mabel Haggman, Hurley Hospital, Flint; treasurer, Frances Drake, 4708 Brush Street, Detroit. Chairman of Committees are: Ways and Means, Louise Gliem; Legislative, Alice Lake; Finance, Lulu B. Durkee. The next meeting will be held in Grand Rapids. Annie Coleman, formerly Inspector of Nurses' Training Schools, of Michigan, is taking up her residence in Peoria, Ill. Miss Coleman has been actively interested in every nursing interest in the State and her going is considered a loss to Michigan. The Michigan State League had for its program for 1925: Institute for Instructors, Kalamazoo; Standardization of Nurses' Records; A Study of Textbooks; Completion of the History of Nursing. At an Executive Board meeting of the League, the members considered the necessity of all League members taking the *Journal*, and the Board voted "to go on record as favoring 100 per cent. subscription for the M. L. N. E. members, and that the *Journal* be recommended for use in teaching, especially Current History in the History of Nursing classes." **Detroit.**—The regular meeting of the Detroit District was held at the Children's Hospital of Michigan, November 6. Doctor Macey, of the Merrill Palmer School, gave a lecture on Nutrition in which the vitamins and the vitamin theories were demonstrated by living white rats and the results of feeding by unique charts. Refreshments were served following the meeting. Mary C. Wheeler, new General Secretary, called a meeting of the Presidents and Secretaries of the various Alumnae Associations of Detroit, in conference with herself, the President and Secretary of the Detroit District, some members of Committees and Directors of that Association. They met at a subscription dinner at the Women's City Club. It was a meeting directly interested in the development of plans for the Michigan Membership Campaign. Miss Wheeler gave to each member present: A Letter of Talking Points, Application Blank for Detroit District, Constitution and By-laws, Two copies of the State Association, Green Slips for *The American Journal of Nursing*. A meeting of the Practical Nurses' Committee of the Detroit League was held on October 11 at Harper Hospital Nurses' Home. After discussing the situation as it is at the present time, two years after the appointing of the present committee, it was decided that before going further with the curriculum or investigation of probable places

of training for Practical Nurses, the Committee would: Find out if there is any legal way in which commercial registration could be compelled to comply to a standard similar to that required of approved registries; to find out the names of all commercial registries, where they are located and the kind of service they are giving; also to find out from the State Board of Registration how many persons have taken the examination for trained attendant, the addresses of the same, and what the reaction of the public is to their service; to discuss the reward that would be made possible to the Practical Nurse who would be willing to make the effort and take the examination for Trained Attendant. THE DETROIT DISTRICT ASSOCIATION gave a banquet to the new General Secretary, Mary C. Wheeler at the Woman's City Club. Miss Wheeler was the speaker of the evening. THE FARRAND TRAINING SCHOOL ALUMNAE ASSOCIATION has started its campaign to raise $40,000 for a bed endowment for graduates of the School. $5,000 has been raised. It is hoped that every graduate of the school will subscribe $50, payable in three yearly installments. The hope chest which has been in preparation for a long time was disposed of by raffle. On November 20, at a tea in McLaughlin Hall. THE GRACE HOSPITAL ALUMNAE ASSOCIATION held its annual meeting October 13. The following officers were elected: President, Mary Conroy-Miller; vice presidents, Eleanor Tableman, Hilda Cox; recording secretary, Anne McGonegal; corresponding secretary, Zena TenDyke; treasurer, Annette Walker. On November 7, Doctor Pendleton, of Shantung, China, addressed the nurses on her work, bringing to them a message from Myra Sawyer, Director of Nursing, whose school the Grace Alumnae has endowed sufficiently to maintain always a native nurse in training. **Muskegon.**—DISTRICT NUMBER 5 of Michigan (the Muskegon District), has accepted the model form for the new constitution. The following officers were elected to serve until January 27: President, Amy Beers; vice presidents, Ellen Anderson, Grace Bode; secretary, Ella Russell. Two new directors were elected.

Minnesota: Minneapolis.—THE THIRD DISTRICT ASSOCIATION held its October meeting at the Fairview Hotel. The Fairview Hospital Alumnae acted as hostess. After a short business session a lecture was given by Professor O. Myking Mehus, of the Sociology Department of the University of Minnesota, on the Social Aspects of Nursing. This is the first of a series of eight lectures which will be given at the nurses' meetings through the winter. One hundred and twenty-five members attended. **Montevidio.**—THE MONTEVIDIO HOSPITAL held commencement exercises September 23, at the Methodist Church. A class of two completed the three years' course, with one year affiliation at the University Hospital. A banquet was given in honor of the graduating class, October 26, by the Alumnae Association. **Faribault.**—The regular meeting of ST. LUCAS HOSPITAL ALUMNAE ASSOCIATION was held on November 3, at which an interesting report of the State Convention was given. Five nurses were graduated from St. Lucas on October 14, the event was preceded by the annual banquet of the Alumnae on October 13. **St. Paul.**—Myra Kimball, Instructor at Ancker Hospital, has resigned her position and will take a much needed rest. Miss Burns has returned to the staff at the Ancker. THE ST. PAUL HOSPITAL has welcomed most warmly Florence O'Neil, graduate of St. Mary's, Rochester, as instructor and Delia Fallos as Obstetrical Supervisor. Miss Fallos is now filling the position formerly held by Aagot Ramberg, who is X-Ray and laboratory technician at the Northwestern Hospital, Brainerd.

Mississippi: The fourteenth annual meeting of the MISSISSIPPI STATE ASSOCIATION OF GRADUATE NURSES was held in Gulfport, October 28-29. The meeting formally opened at 10 a. m., Wednesday and was preceded by a meeting of the Board of Directors, during which forty applicants were received into membership. At noon, the guests enjoyed a delightful luncheon at the famous Great Southern Hotel, given by the Gulfport nurses. Following the afternoon session, a ride was enjoyed and a visit to "Inn by the Sea," also a visit to King's Daughters' Hospital, where tea was served. Wednesday evening was given over to an open meeting at which there were several interesting speakers, among whom was Lillian L. White, field secretary of the American Nurses' Association. Mary H. Trigg, the President, gave an address. Thursday



LILLIAN L. WHITE

Field Secretary, American Nurses' Association

morning was given over to the Public Health and Private Duty sections. Thursday afternoon session was taken up with reports and routine business. The tellers reported on election of officers as follows President, Mary H. Trigg, Greenwood; 1st Vice President and Chairman of Legislative Committee, Syd Vaughn, Poplarville; 2nd Vice President and Chairman of Credential Committee, Mrs. Maude E. Varnadoe, Hattiesburg; 3rd Vice President and Chairman of Nominating Committee, Violet Crook, Magnolia; 4th Vice President and Chairman of Revision Committee, Aurelia Baker McComb; 5th Vice President and Chairman of Publication and Press Committee, Vera Edwards, Tupelo; 6th Vice President and Chairman of Relief Fund Committee, Rose Keating, Jackson; secretary, Jennie Quinn Cameron, Hattiesburg; treasurer, Ida L. Hood, Hattiesburg. The candles on *The American Journal of Nursing* birthday cake were lighted and this was enjoyed by all. Lillian D. White was present at all the sessions and gave some very helpful advice. At the close of the meeting, the delegates enjoyed a ride to the U. S. Veterans Hospital, where the gracious Superintendent of Nurses and her corps of workers conducted them through the Hospital, and served tea. This brought to a close one of the most interesting and best attended nurses' conventions in Mississippi.

Missouri: THE MISSOURI STATE BOARD OF NURSE EXAMINERS will hold examination for nurses, January 27 and 28, 1926, simultaneously in St. Louis and in Kansas City. Write to Jannett G. Flanagan, Secretary of the

Board, 529-a East High Street, Jefferson, or apply to your School of Nursing for application. THE MISSOURI STATE NURSES' ASSOCIATION held its twentieth annual meeting and the Missouri State League of Nursing Education its fifteenth annual meeting, at Hotel Robidoux, St. Joseph, October 28-30. The annual meeting of the MISSOURI STATE LEAGUE OF NURSING EDUCATION was held conjointly with the Missouri State Nurses' Association at St. Joseph, October 28 to 30. Helen Farnsworth of Kansas City was elected President of the League for the coming year, and Marie C. Brockman of St. Louis, President of the State Nurses' Association. **Kansas City.**—THE A. S. O. HOSPITAL ALUMNAE ASSOCIATION, SIXTH DISTRICT, held its annual meeting at the Travelers Hotel, September 25. Five new members were admitted and the following officers elected: President, Anna Rydelotte; secretary, Amy Lee. **St. Louis.**—THE ALUMNAE ASSOCIATION OF THE WASHINGTON UNIVERSITY SCHOOL OF NURSING held its fifth annual bazaar at the Nurses' Home, November 13. The proceeds are to be used for the endowment fund for sick nurses.

Nebraska: THE NEBRASKA STATE NURSES' ASSOCIATION held its twentieth annual meeting in Lincoln, October 27-28, with headquarters at the Lincoln Hotel. The address of welcome was given by Governor McMullen. After the address by Miss Bryant and the annual reports of officers and committees, Mrs. Elsbeth Vaughan of Missouri spoke on the Red Cross and Charlottee Johnson of Chicago on Communicable Diseases. Tuesday afternoon was given to a meeting of the State League with the following program: Address of Welcome, Mayor Zehrung; The Relation of the Department of Public Welfare to the Nursing Profession, Judge Lincoln Frost, Department of Public Welfare; Teaching Sociology in Schools of Nursing, Professor William L. Bailey, Northwestern University, Chicago; Correlation of Subjects in Schools of Nursing, Marguerite Hunt, Lincoln; Report of Convention of the National League of Nursing Education held in Minneapolis, Lulu F. Abbott. The members enjoyed a banquet in the evening. Subjects considered on Wednesday were: Greetings, Mrs. Edward L. Marty, President Lincoln Federation of Woman's Clubs; Educational Phase of Sheppard-Towner Act, Louise Murphy; Maternity and Infancy Work Among Indian Agencies, Mrs. Addie Boucher; Sociological Importance of the Nurse, Dr. H. P. Bartholomew; Radium, Dr. Everett Angle; Pneumothorax, Dr. Geo. Covey; Prenatal Care, Dr. Chas. Moon; Demonstration Trays; Phases of Dentistry of Interest to Nurses, Dr. M. E. Vance; Report of International Council, Adah Hershey, President Iowa State Nurses' Association; Vocational Education in Relation to Nursing Profession, C. A. Fulmer; The American Nurse, Dr. S. Mills Hayes. A tea was given at the Lincoln General Hospital. Homer C. Harris, Clarkson Hospital, Omaha, was elected president.

New Hampshire: Claremont. — THE CLAREMONT GENERAL HOSPITAL ALUMNAE ASSOCIATION elected the following officers for the coming year: President, M. F. Larrabee; vice presidents, Marjorie Frazer, Flora Mann; secretary, Florence Mathewson; treasurer, Mrs. Clara Hamy Rein. **Concord.**—The regular meeting of the NEW HAMPSHIRE STATE HOSPITAL ALUMNAE ASSOCIATION was held September 30, in the Nurses' Home. The usual routine business was transacted, after which ways and means of adding financially to the funds were discussed. A series of card parties will be held to accomplish this. An interesting report of the State Association was read by Eliza Roberts, a delegate to that meeting. Following adjournment, a social hour was enjoyed. **Franklin.**—THE LACONIA HOSPITAL ALUMNAE ASSOCIATION met at the home of Della V. Carr, Secretary and Treasurer, on October 30. A business meeting was called at 8 p. m. by the President, Katherine McReary, after which a social hour was enjoyed.

New York: THE NEW YORK STATE LEAGUE OF NURSING EDUCATION has elected the following officers for the coming year: President, Elizabeth C. Burgess, New York City; vice president, Eva Dunne, Buffalo; secretary, Mary E. Robinson, Brooklyn; treasurer, Mary K. Smith, New York City. The twenty-fourth annual meeting of the NEW YORK STATE NURSES' ASSOCIATION was held in Albany, October 27-29. October 27 was taken up with the annual sessions of the State League of Nursing Education and the Public Health organization. A joint session of the

three organizations was held in Chancellor's Hall, Education Building, in the evening, Elizabeth C. Burgess, President of the League, presiding. The invocation was by Dr. J. V. Molderhawer. The address of welcome by Mayor William S. Hackett; the response by Mrs. Anne L. Hansen, president of the State Nurses' Association. Alfred W. Martin, Society of Ethical Culture, New York City, gave a very inspiring and beautiful address on What Human Life Is for. Elizabeth G. Fox, President, National Organization for Public Health Nursing, spoke on the Obligation of Opportunity, which brought home to each nurse present, much for thought and consideration, as it was proven that the life of service is the one worth while, if this service is properly given. On October 28 and 29, occurred the sessions of the State Association. The first was given to reports of the officers and chairmen of committees, which showed that much work had been accomplished during the year. There was a roll call by districts, at which a short report of the activities of each district was given. These were very interesting and showed that the association is composed of live constituents. Mrs. Chester C. Bolton, Cleveland, Ohio, gave an excellent address on The Future Service of the Private Duty Nurse. Two demonstrations were given on instructions to young mothers in the care of her baby, one by a visiting nurse, Gene Joy, New York City, the other by a private duty nurse, Emilie Gemmell, Troy. Wednesday evening, October 28, a banquet was given at Hotel Ten Eyck, the members of Capitol District Number 9, being hostesses. Following this a very fine musical program was rendered. The morning session of October 29 was given to round tables, one on Professional Ethics, Elizabeth C. Burgess, presiding; Publicity Methods and Results, Grace E. Allison, presiding. The Advisory Council held a meeting in the afternoon, after which a delightful tea was given by the Board of Managers, Albany Guild for Public Health Nursing and the women of the Boards of Directors of the Schools of Nursing in District 9. In the evening the nurses of Albany gave an entertainment, Nurses' Follies, after which the report of the tellers was given. The following officers were declared elected: President, Louise Sherwood, Syracuse; vice presidents, Lydia E. Anderson, Brooklyn; Lena A. Kranz, Utica; secretary, Ella F. Sinsebox, Buffalo; treasurer, Alice A. Holmes, Syracuse; directors for three years, Mrs. Anne L. Hansen, Buffalo; Mary M. Roberts, New York City; Nurse Examiners, Elizabeth Rochhold, Carolyn Gray. The next convention will be held in Binghamton, October 26, 27, 28, 1926. **New York.**—Many of the unofficial registries for nurses, in New York City, Brooklyn and Long Island, have formed an organization and are incorporated under the name, The Greater New York and Long Island Association of Registries for Nurses, Inc. Their object is "a high standard of nurses, obeying the laws of the city by no misrepresentation." The secretary is Ida Young, 248 Garfield Place, Brooklyn. Blanche E. Edwards has returned from Iowa, where she was secretary of the State Association, to take a position on the staff of the Bellevue School of Nursing. **Rochester.**—The annual meeting of the Rochester Homeopathic Hospital was held at the Nurses Home, November 2. The following officers were elected: President, Bertha Mischler; vice presidents, Helen Hadlow, Christine Verstring, Lucile Dean; secretary, Janet Scott; treasurer, Elizabeth Weber. Chairmen of Committees are: Program, Esther Henckell; Welfare, Ida J. Anderson; Federation of Clubs, Bertha H. Phillips. Doris Van Zandt Chambers represents the alumnae on the Training School Board. Meetings are held monthly, the educational program being followed by a social hour. Miss Peters gave a report of the State meeting. At the October meeting, Grace Fraser told of her preparation for mission work in China under the China Inland Mission. Her address is Yangchow, Kiangsu. Other missionary nurses are Frances E. Culley, 70 Kuling, Kiangsi, China; and Lillian V. Wagner, Baptist Mission Hospital, Ramapatnam, Nellore District, South India. The association sends $25 a year to each of these for use in her work. The Park Avenue Clinical Hospital Alumnae held its November meeting at the Hospital, with a large attendance. A report of the New York State Convention was read. **Seneca Falls.** Caroline F. Garnsey, Superintendent of the Seneca Falls Hospital for the past two years, has resigned to accept a position on the nurses'

staff of the Johns Hopkins Hospital, Baltimore, Md. Miss Garnsey was the first superintendent of the hospital and during her administration many beneficial changes have been made. **Syracuse.**—The Memorial Hospital Alumnae Association is arousing enthusiasm in its members by appointing a program committee which procures a speaker for each meeting. Sometimes the speaker is a physician or a social and welfare worker, sometimes a civic worker, anybody who has something of interest to tell. Last year this committee produced a little play which was very much enjoyed. At each meeting one of the members reads a short paper on some woman prominent in the nursing world at the present time. In this way they become familiar with the big workers of the profession. This has been a great help in increasing attendance, enthusiasm and the spirit of the meetings. In September they appointed an assistant treasurer as the work became quite heavy for one person who has held the office for many years. **Troy.**—The Leonard Hospital, Lansingburgh, held graduating exercises for a class of ten, October 14, at Riverside Club. This was the largest number ever graduated from the school. The invocation was by Rev. C. V. King, the address by Hon. Daniel H. Prior, of Albany, followed by the administration of the Nightingale Pledge. The address to the class was given by Dr. E. F. Connally. Paul Cook conferred the diplomas and Mrs. Frank B. Twining presented the school pins. The prizes were awarded by Paul King. On the evening preceding commencement, the alumnae gave a banquet to the graduating class.

Ohio: Cincinnati.—District 8 Association will hold a business meeting at the Jewish Hospital, Strauss Hall, December 15, at 8 p. m., followed by a special program under the auspices of the Jewish Hospital Alumnae Association. The October meeting was held in Middletown. Miss Fagan, president, and Miss Wahn, Instructor at Christ Hospital, gave reports of the joint institute in Cleveland. After the business meeting the members were driven to a delightful cottage at the outskirts of the town, where the Ladies Auxiliary of the Middletown Civic Association served tea and the members were entertained with music. The Public Health Section of District 8, had a well attended luncheon meeting in November. Forty-eight nurses were present to hear Doctor North give a very interesting talk on Paranoias. The Alumnae of the Jewish Hospital School for Nurses, had a very interesting meeting in November. Mrs. E. W. Jacocks, Secretary, gave a splendid report of the Parent-Teacher Association Convention. Plans were discussed for the annual card party to be held in February. The School of Nursing and Health, Cincinnati General Hospital, held a bridge party on November 16, the proceeds to be used to establish a scholarship in that school. **Columbus.**—The Grant Hospital School of Nursing held graduating exercises for a class of 42, at the Broad Street Methodist Church, October 1. Mary A. Jamieson, Superintendent of Nurses, presented the class. The address to the graduates was given by Judge Florence E. Allen. After the exercises a reception was given at the Nurses' Home. **Dayton.**—District 10 held its October meeting at the National Military Home. Forty members enjoyed the tour of inspection and the following program: Founding and Purpose of the Military Home, Col. Roberts, Surgeon in Charge; Activities in the New Tubercular Hospital, Major Deathridge; Red Cross Activities at the Military Home and Community, Miss Williamson, Director of Red Cross; Occupational Therapy at the National Military Home, Miss Beach, member of the Occupational Therapy Staff. Refreshments were served after the program. **Youngstown.**—St. Elizabeth's Hospital School of Nursing held graduating exercises on November 12, in the Assembly Room, Ohio Hotel. Diplomas were conferred by Bishop Joseph Schrembs of Cleveland.

Oklahoma: The Oklahoma State Nurses' Association held its annual convention in Tulsa, October 28, 29, 30, with headquarters at the Mayo Hotel. Special sessions were held by the Private Duty Section, the Public Health Section and the State League of Nursing Education. Frances V. Brink, Field Secretary of N. O. P. H. N., gave many inspirational and helpful suggestions throughout the meeting. At the business session, special appropriations were made for the Isabel Hampton Robb Memorial Fund and for the McIsaac Loan Fund for this year. Mable Garrison and Mrs.

Margaret Morrison were appointed as historians for the State Association. The next annual Convention will be held in Oklahoma City. Officers elected were: President, Anna Picklum, El Reno; secretary-treasurer, Mrs. Virginia Tolbert Fowler, Oklahoma City.

Pennsylvania: The Graduate Nurses' Association of Pennsylvania held its twenty-third annual convention in Williamsport, at the Lycoming Hotel, October 26-29, in joint sessions with the Pennsylvania League and the State Organization for Public Health Nursing. The first two days were devoted to the business of the Association and the evening sessions were open meetings which were largely attended. On the opening night Adda Eldredge, national president, gave a very comprehensive talk on the plan and development of our American Nurses' Association, bringing the national association very close to the Pennsylvania nurses. Clara D. Noyes, Director of the American Red Cross Nursing Service, gave a very vivid picture of the contribution made by the Red Cross Nursing Service in this and other lands, and what a splendid part has been played by the Red Cross in the development of European schools of nursing. The second evening was devoted to the annual banquet which was over-subscribed, long before the ticket sale was closed, and taxed the capacity of the large banquet hall of the hotel. This is always one of the pleasantest parts of the annual meetings. Two very fine addresses were given. One by S. Lillian Clayton of Philadelphia, who was one of the nurses chosen by the Rockefeller Foundation, for the study of European Training Schools, on The Nursing Situation in Europe; the other, by Dr. Richard Olding Beard of Minneapolis on The Interrelation of Nursing Education, Legislation and Practice. One outstanding accomplishment of the Convention was the decision to establish headquarters and a full time Executive Secretary. Pennsylvania's membership is now more than 6,300 and the work of a full time Secretary is essential for greater service. Another important achievement, the unanimous choice of Roberta West, to compile the Nursing History of the State. Miss West has been engaged in the nursing profession for forty years and has contributed very richly to the making of nursing history for Pennsylvania during that time. One other feature was the proposal of a "Code of Ethics," which had its first reading by the Chairman of that Committee, Ida Giles. The code was very favorably received and with some alteration will be presented again at next year's meeting. The coöperation of the three nursing groups was pledged for the purpose of investigating the possibility of establishing postgraduate courses in nursing in both State Universities,—University of Pennsylvania and the University of Pittsburg. Officers for the ensuing year are: President, Jessie Turnbull, Pittsburg; vice presidents, S. Lillian Clayton, Philadelphia; Esther Linsley, Pittston; secretary-treasurer, Netta Ford, York; directors, Ida Giles, Johnstown; Gertrude Heatley, Pittsburg. Philadelphia is the meeting place chosen for the 1926 Convention. Katharine J. Mayer was elected chairman of the Private Duty Section; E. Stuart Chisholm, vice chairman; and Edna Wagner, secretary. **Ashland.**—The Ashland State Hospital Nurses' Alumnae Association, held a special meeting at the Nurses' Home, October 28, with a fair attendance. The next, and annual meeting, will be held December 9, when officers for 1926 will be elected. Commencement exercises were held in the Ashland High School Auditorium, for a class of 15, on October 14. Elizabeth F. Miller, Nursing Consultant, State Department of Welfare, gave the address, Theodore W. Riley, President of the Board of Trustees, presented the diplomas, Emma P. Stranford, Acting Director of Nurses, presented the class pins. Sarah E. Martin, a graduate of Jefferson Hospital, has retired under the Nurses' Retirement Act which was passed by the State Legislature in 1923, after thirty-one years of continuous service at the Ashland State Hospital. Mary Kurchinsky, class of 1916, has been appointed Superintendent of Locust Mount State Hospital, Shenandoah. **Bethlehem.**—The annual meeting of St. Luke's Hospital Alumnae Association was held at the Graduate Nurses' Home, October 19. Forty nurses were present. The following officers were elected for the ensuing year: President, Bessie Clinch; vice president, Ida Parrish; secretary-treasurer, Bessie Ely; corresponding secretary, Sadie Gallagher. After the business session, tea was served to the Alumnae members and the Graduating Class. **Philadelphia.** — The

September meeting of the SAMARITAN NURSES' ALUMNAE ASSOCIATION was held on the 29th, in the Nurses' Home; there were present, fifty-three members,—pupil nurses and visitors making a total of eighty-nine. This being the annual meeting a report was made by all the Committees. Twelve members were elected during the year, six reinstated. There are ninety-three resident and fifty non-resident members in good standing. The entertainment Committee reported having furnished refreshments several times during the year; Endowment Committee, $95 in Initial Fees received; Sick Committee have made forty-five sick calls during the year, eight nurses cared for in the endowed room; Flower Committee sent twenty-seven flower tributes. Twelve-hour duty in the Hospital has practically been instituted during the past three months by the Directress, Emma Eschenbach. $800.00 worth of Samaritan Hospital Bonds were subscribed for during this meeting. Three brief addresses were given: Coöperation between the Alumnae and the Hospital, by Dean Carnell of the Temple University; How to Obtain a College Degree While Taking a Nurses' Training Course, Miss Peabody, from the Temple University; High Points in Alumnae Work, by the Secretary. Election of officers resulted in the reëlection of all former officers, namely: President, Agnes Baumann; vice president, Edna Moore; secretary, Jessie M. Rowe; assistant secretary, Jeanette Walter; treasurer, Helen Krause. Committees were appointed for the coming year. $2,000 was invested in Metropolitan Edison Bonds for the Alumnae Room. Books of Association audited and found in good condition. THE CHILDREN'S HOSPITAL ALUMNAE held an interesting meeting recently, Miss Beaver presiding for the president who was absent. Miss Neilson was chosen to represent the association on the Training School Committee. Plans were made for securing funds for a room for sick nurses in the new hospital building soon to be erected. **Pittsburgh.**—THE NURSES' ALUMNAE ASSOCIATION OF THE ALLEGHENY GENERAL HOSPITAL were treated to a splendid report of the State Convention at Williamsport at their November meeting. The picture of the sessions was so vividly drawn by the delegates that each member present felt she was attending the Convention and in close touch with the State work. THE SOUTH SIDE HOSPITAL ALUMNAE ASSOCIATION held a corn roast and weiner bake on September 2, at Carrick Park. One hundred nurses were present and had a very enjoyable evening. A free-will offering was taken to help defray expenses.

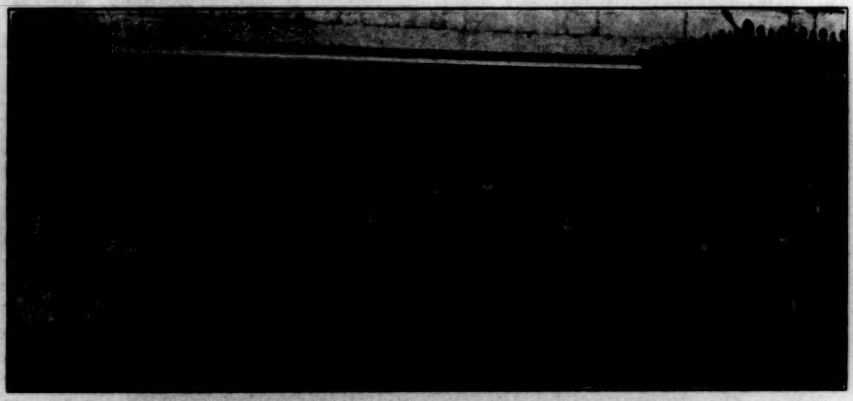
Rhode Island: A joint meeting of the three state associations was held at Butler Hospital, Providence, on October 28. The Rhode Island State Nurses' Association was called to order by Ellen Selby; Rhode Island League of Nursing Education by Sarah Barry, and the Rhode Island State Organization for Public Health Nursing by Annie M. Earley. After the morning session the members were the guests of Butler Hospital for luncheon. At the main session of the joint meeting held in the afternoon, Marjory Stimson, Nursing Field Representative for Eastern Massachusetts and Rhode Island, explained the function of the Red Cross nurse in peace times. Dr. Bancroft Beatley, Assistant Professor of Education, Harvard University, addressed the members, his subject being: What Constitutes Good Teaching? Mary S. Gardner, Director of the Providence District Nursing Association, reported on the Congress of Nursing at Helsingfors, giving a very interesting account of the nursing situation in other countries. About 200 nurses were present during the day. **Providence.**—The regular monthly meeting of the RHODE ISLAND HOSPITAL NURSES' ALUMNAE ASSOCIATION was held at the Nurses' Home, October, 27. The speaker of the afternoon was Miss Haesle, Curator at the Park Museum, who gave an interesting account of her classes for leaders of the Boy and Girl Scouts, Campfire Girls and kindred organizations. A social hour followed. ST. JOSEPH'S HOSPITAL NURSES' ALUMNAE held its quarterly meeting at the Nurses' Home, October 28. Plans were made for celebrating the 25th anniversary of the Training School. Following the business meeting, Winifred Fitzpatrick, of the Providence District Nursing Association, addressed the members, on Public Health Nursing.

South Dakota: THE SOUTH DAKOTA STATE NURSES' EXAMINING BOARD will hold an examination for registration of nurses at the Capitol Building, Pierre, January 12 and 13, 1926. Applications must be filed with the Secretary, Mrs. Elizabeth Dryborough, Rapid

City, at least two weeks in advance of the examination.

Tennessee: The Tennessee State Nurses' Association has elected the following officers: President, Abbie Roberts, George Peabody College, Nashville; first vice president, Ida McIntosh, Memphis; second vice president, Ruth White, Knoxville; secretary, Mrs. William Johnson, Knoxville; treasurer, Phoebe Bumgarner, Baroness Erlanger Hospital, Chattanooga. Chairmen of committees are: Relief Fund, Dorothy Ebb, Chattanooga; Ways and Means, Elsie Russ, Nashville; Revision, Alma Sowell, Memphis; Publicity, Lucille Satterfield, Nashville; Nominating, Naomi Blouin, Memphis; Program, Montez Wayne, Knoxville. The State Board of Nurse Examiners has the following change in personnel: President, Dr. B. V. Howard, Knoxville; secretary-treasurer, Annette Beal, 402 Woodland Street, Nashville; Dr. Y. W. Haley, Nashville; Dr. J. D. Brewer, Dyersburg; Canie Hawkins, Memphis. **Chattanooga.**—The Chattanooga nurses were delightfully entertained with an address by Lillian White, October 22; the meeting was held in the Sun Parlor of the New Nurses' Home at Erlanger Hospital. Miss White spoke on the History of the Nursing Organizations. She brought out many points of interest and benefit. A luncheon was given her by Harriet Pearson and Inez Layfield. The Chattanooga District Nurses' Club in Memphis. Nellie Oxley, Executive Secretary of the Guild of St. Barnabas for Nurses, spoke also, setting forth the aim of the order, with a view to forming a branch in Memphis. Following the meeting, refreshments were served at Hotel Claridge. **Nashville.**—Edith Brodie, graduate of Smith College, and the New York Hospital (preliminary work at the Vassar Camp), has accepted the position of Director of the School of Nursing of the Vanderbilt University Hospital. Miss Brodie is resigning the position of Instructor on the faculty of the School of Nursing of the Washington University, St. Louis.

Nurses' Association realized $200 from the booth which was held at the Fair in October. It rained almost every day and the profit was not as large as usual. **Memphis.**—The Nurses' Association of District 1, at a meeting held October 26, was given a most interesting talk by Lillian White, who stressed the need of an Executive Secretary for the state, as well as encouraging the thought of a



Group of Members, Tennessee State Meeting

Utah: Salt Lake City.—The Latter Day Saints' Hospital Alumnae Association on October 13, elected the following officers for the ensuing year: President, Mrs. Myrtle Swenson Horne; vice president, Elva Sorenson; treasurer, Mrs. E. G. Richards; secretary, Viola Bramwell. Because the Utah State Nurses' Association is holding its meeting in

October, the Alumnae decided to hold its annual meeting for the election of officers in October instead of May as heretofore.

Vermont: The semi-annual meeting of the VERMONT STATE NURSES' ASSOCIATION, held in Montpelier, October 20, was one of the pleasantest ever held. The program was preceded by a business meeting and the following Nominating Committee was appointed: Hazel Berry, Mrs. Katherine Mahoney, Bessie Beaton, Katherine Crozier. It was with regret that the resignation of the president, Erna A. Kuhn, was received. Miss Kuhn leaves about January 1, for the Philippines, where she will do Red Cross work. She will be succeeded by Hazel E. Danbrook, acting president, 10 Liberty Street, Montpelier. Mrs. Murray Tucker, Chairman of the Public Health Committee of the Federation of Women's Clubs, spoke of the public health scholarship at Simmons College, of $250, and urged its use. Edith Clapp, Field Secretary of the American Nurses' Association, was an honorary guest. She told of National Headquarters and of the help available to nurses. Miss Kuhn and Mrs. Fred E. Martin gave splendid reports of the New England Division convention in Boston, last May, and the District meeting of the General Federation of Women's Clubs in Swanton. Katherine Kinsley read resolutions on the death of Anna M. Nelson; the nurses stood for a few moments in memory of her character and ability. An address was given by Dr. Alan Davison, St. Albans, Chief Surgeon of the Central Vermont Railway Company, in the afternoon, and one in the evening by Dr. Edward J. Rogers, Superintendent of the Vermont Sanitarium, Pittsford. The hospitality of the Heaton Hospital Alumnae Association was unbounded; a delicious supper was served at the New Nurses' Home, 'mid Hallowe'en decorations. The *Journal* birthday cake was cut at supper and seven candles blazed forth the news of new subscribers. From the 1925 survey of 2,395 hospitals in the United States and Canada, 1,564 met the requirements of Hospital Standardization. In Vermont six out of eight hospitals surveyed, have been accredited and appear on the approved list of the American College of Surgeons.

Virginia: A special meeting of the GRADUATE NURSES' ASSOCIATION OF VIRGINIA has been called for December 3, in Richmond, for the purpose of discussing the certification of tuberculosis training schools in state sanatoria. At the same time there will be a meeting of the educational section of the association, of which Josephine McLeod is chairman. The Foundation Fund Committee states that of the $50,000 required for the establishment of a chair of nursing at the University of Virginia, Charlottesville, $34,000 is already in hand. Richmond, Roanoke, Lynchburg and Alexandria have reached their quotas and plans for campaigns are now under way in a number of other cities. It is felt that the entire amount will have been pledged as soon as these campaigns can be accomplished. **Roanoke.**—The Altrusa Club of Roanoke has not only endorsed the campaign of the State Nurses' Association to establish a Chair of Nursing in the University of Virginia, but it has also secured a full page "write-up" in The National Altrusan bringing this important nursing activity to the attention of an active nationally organised body of women. **Westhampton.**—A sanitarium for convalescent and chronic patients will be established shortly by Rose Z. Van Vort and Frances Galisch who are having a fine old place made over for this purpose.

Washington: Everett. — The regular monthly meeting of DISTRICT No. 9 was held October 6, at Providence Hospital. This is the second annual meeting and an increase in membership and enthusiasm for the new year's work are reported. The following officers were elected: President, Anna R. Moore; vice president, Ada Babcock; secretary, Frances Sinclair; treasurer, Carrie Lindholm. Plans for the State Convention, to be held in this city, in June, were discussed. The President appointed a Committee on Arrangements, Chairman, Mrs. Katherine Crawe. **Yakima.**—The Public Health Nurses of Yakima are arranging for a series of six talks to be given to the student nurses of St. Elizabeth's Hospital, the only one in our city. There will be about twenty-five students present at these talks. The following is the program: 1. An outline of the History of Public Health Nursing, Margaret Mary Cassidy; 2. Development and Present Status of School Nursing, Mrs. Georgan O'Brien; 3. Visiting Nursing and Infant and Child Welfare Nursing, Mildred

EDITH J. L. CLAPP
Field Secretary, American Nurses' Association

Weber; 4. Red Cross Nursing Activities and Rural School Nursing, Mary C. Roberts; 5. Tuberculosis Nursing, Margaret Mary Cassidy; 6. Educational Facilities and Opportunities Available for the Public Health Nurse, Elizabeth S. Soule. Each speaker will be asked to provide a bibliography on the topic on which she speaks.

Wisconsin: The annual meeting of the WISCONSIN STATE NURSES' ASSOCIATION, the League of Nursing Education and the Public Health Organization was held in Eau Claire, October 19, 20, 21. The first morning which was opened by the unison reading of the Collect of the Women's Clubs was devoted to reports of officers, districts, committees and the Private Duty Section. All of the twelve districts gave very encouraging reports. The treasurer's report showed a gain of 183 in membership which had been stimulated by the association offering to the district making the greatest percentage gain of membership, a gavel. This contest will be an annual event. The noonday luncheon was in the form of a birthday luncheon in honor of the past presidents and the present one, Cornelia van Kooy. The past presidents who responded in person were Mrs. Eva Wolf and Agnes Reid. Telegrams and letters were read from the following past presidents: Helen Kelly, Mrs. Price Davis, Regina White, Mrs. Northway and Mrs. Dernehl. As each responded by person or communication, a candle was lighted on the birthday cake for each year of service and Adda Eldredge, President of the American Nurses' Association, lighted the one to the memory of Mabel Croydon Bradshaw whose death occurred this year. The gavel for the

greatest gain in membership was received by the president of the Fourth and Fifth District. At the afternoon session, Miss van Kooy gave her report of the International Congress of Nurses which showed many phases of the meeting. Other speakers of the afternoon were Hilda Belle Oxby of the Faculty of the Eau Claire Normal School, who gave a vivid account of the International Congress of Women held in Washington this year and Mrs. A. H. Shoemacker, President of the State Federation of Women's Clubs, who brought out clearly the benefits of each district association affiliating with the county federation; she also gave excerpts from the National Conference of Child Welfare Workers. At the close of this session the visitors were given a ride to Chippewa Falls and visited the Rutledge Home for the Aged in that city and on the return journey were entertained at a luncheon by the Sisters at the Sacred Heart Hospital, Eau Claire. In the evening the organization received its official welcome from the city of Eau Claire. The mayor, John Barron, delivering the address of welcome and little Harriet Stella Favell presenting the key of the city to the President of the State Association. Those responding to the address of welcome were Cornelia van Kooy for the State Association, Grace TeBrake for the League of Nursing Education and Cecelia Evans for the Public Health Organization. The main speaker of the evening was Wm. C. Sainsbury, D.D., of St. Paul, Minnesota. He devoted much of his talk to the ideals of the medical and nursing professions and warned of the danger of commercialism and over professionalism, saying that the art of fine training is to conceal the evidence of that training. He also said that superstition born of ignorance was the greatest obstacle that nurses had to contend with in their daily rounds and lauded the advances that the profession had made in the last fifty years. Adda Eldredge, Director of the Wisconsin Bureau of Nursing Education, gave the report of the Bureau and a short talk which closed the evening session. The second day began with a Council breakfast at 7:45. The general session was conducted by the Public Health Organization, Cecelia Evans, presiding. The invocation was given by Dr. Wm. W. Bolt. Mrs. Shoemaker of the Woman's Clubs was asked to speak informally on the County Nurse and at the business session the president was authorized to appoint a committee of five to study the situation and problems of the county nurse in the state and report at the March meeting. Dr. T. L. Harrington of the Wisconsin Anti-Tuberculosis Association in his address urged special training in the care and prevention of tuberculosis and suggested that undergraduates be given a course at the state sanitariums. Preventive Dentistry was interestingly treated by Dr. P. B. Jaeger, president of the Northwestern District Dental Association. He stressed the value of correct diet especially for young children. The noon hour was given over to round table luncheons. Tora Johnson, vice president of the Private Duty Section, presided in the afternoon. Frances Ott, first chairman of the National Private Duty Section, entertained and inspired the nurses with a characteristic talk. Miss Ott staid the three days and many members took this opportunity to talk with her. Adda Eldredge spoke on The Need of a Private Duty Section. At the close of this session the State Organization endorsed the World Court and sent suitable resolutions to the Peace Award Committee. The crowning success of the entertainment committee was in the form of a banquet the second evening. All in attendance received a lei to which was attached a pendant on which was printed the Woman's Club collect which was read before the seating of the guests. During the dinner, Major Julia Stimson arrived and all rose in a body to welcome her. Adda Eldredge introduced Cornelia van Kooy, who had been reëlected, who in turn introduced the new officers and directors and asked the two past presidents present, Mrs. Eva Wolf and Agnes Reid, to rise. The Tenth District at this banquet conferred life membership on Millie Jacobsen and Tora Johnson and honorary membership on Adda Eldredge, Julia Stimson, Frances Ott, Cornelia van Kooy and Mrs. C. D. Partridge. The great surprise of the evening was the drawing of tickets from a hat, the lucky number drawing a delightful gift. Local guests and officers of the State and Tenth District apparently drew all the lucky numbers. Consolation bouquets were given to Adda Eldredge and Cornelia van Kooy. The Address of the banquet was Light

and Nutrition, by G. W. Keller, Superintendent of the Eau Claire public schools. After the banquet a dance followed to which the members of the American Legion had been invited. The last day was given over to the League of Nursing Education, Grace TeBrake presiding. In her annual address she reviewed the growth of the organization and the secretary's report showed an increase of 100 per cent. Reports from the districts were given. A picturesque description of nursing education as presented at the International Congress of Nurses was given by Adda Eldredge who told of the proposed plans for the Congress and said that the pressing need at the present time was for funds to carry out this program. At the opening of the afternoon session the Girl Scouts carried in the "Colors" and the National Anthem was sung. Major Julia Stimson was the first speaker and spoke on Educational Work in the Army Nurse Corps. Following was a paper by Dr. R. M. Greenthal of the Milwaukee Children's Hospital, which was discussed by Charlotte Johnson, Superintendent of Nurses of the Durand Hospital, Chicago. Ruth Kahl, of the Visiting Nurses' Association of Milwaukee, gave a very practical talk on Communicable Disease Nursing in the Home and Martha Werth, Supervisor of Contagious Diseases of Milwaukee's Children's Hospital closed the afternoon with a demonstration of Contagious Disease Nursing Technic. Over $400 was subscribed to the Nurses' Relief Fund, and forty-four candles were placed on the birthday cake of *The American Journal of Nursing*. The last social event was a delightful tea at the Mt. Washington Sanitarium. Margaret Pakenham, who has been Treasurer of the Association since it was organized, was given life membership. Following are the officers and chairmen of sections for the coming year: President, Cornelia van Kooy, reëlected; vice presidents, Tora Johnson, Clara Lewis; secretary, Mrs. C. D. Partridge, reëlected; treasurer, Agnes Pickhardt; directors for three years, Faith Collins; Mrs. George Ernst, Norma Schroeder, Ellen Stewart and Sister Beata; directors for one year, Lucy Bethe, Mary O'Keife. Chairman of Private Duty Section, Tora Johnson; secretary, Frieda Daubel. An interesting exhibit was held in connection with the State meetings to which many firms, both national and local, contributed generously. The Arrangements Committee had help from local firms and from the Eau Claire press. Mrs. Mary Morgan, Director of the Bureau of Child Hygiene, of the State Board of Health, Wisconsin, has resigned and now lives in Tarpon Springs, Florida. The Third District nurses gave Mrs. Morgan a farewell party. **La Crosse.**—The Seventh District Association held the annual picnic at Oskaloosa on September 17, with forty members present. On October 8, a meeting was held at the La Crosse Hospital, when Dr. G. R. Raly spoke on Venereal Diseases. **Milwaukee.**—M. O. Slater spoke on the World Court at the last meeting of the Fourth and Fifth District Association. The senior class of the Deaconess Hospital were guests; the hostesses were the alumnae of the Deaconess and South Side Training Schools.

MARRIAGES

Marian Ainsworth (graduate of Washington University School of Nursing, St. Louis, Mo.) to John Barnard, September 28.

Emma Akers to Nicholas Smith Caldwell, September 5. At home, Huntington, W. Va.

Helen Brennan (class of 1922, Long Island College Hospital, Brooklyn, N. Y.) to John Prindiville, in September.

Theresa Camp (class of 1919, Long Island College Hospital, Brooklyn, N. Y.) to Edward Muller, in October.

Grace Bertha Caswell (class of 1921, Laconia Hospital, Laconia, N. H.) to Richard Frank Shelley, September 26. At home, Laconia.

Harriet M. Chapman (class of 1915, Waltham Training School, Waltham, Mass.) to Rev. C. N. Eliopoulos, September 22. At home, Brownfield, Maine.

Gladys V. Dahl (class of 1921, Swedish Hospital School of Nursing, Minneapolis, Minn.) to Arnold Sundseth, October 7. At home, Minneapolis, Minn.

Dorothy Darling (class of 1920, Long Island College Hospital, Brooklyn, N. Y.) to Merwin Armstrong, M.D., October 3.

Eliza Russell Davis (class of 1906, Long Island College Hospital, Brooklyn, N. Y.) to

David Carll, October 5. At home, Washington, D. C.

Alice Elliott (class of 1921, Indiana University School of Nursing, Indianapolis, Ind.) to Homer Binford, October 1. At home, Greenville, Ind.

Helen G. Fahs (class of 1922, York Hospital, York, Pa.) to William Medura, October 10. At home, Baltimore, Md.

Gertrude Frank (class of 1923, Montevideo Hospital, Montevideo, Minn.) to William J. Flannigan, September 27.

Carolyn Fuelts (class of 1925, Latrobe Hospital, Latrobe, Pa.) to Paul Lemon, October 29. At home, North Latrobe, Pa.

Ruby Gillanders (class of 1921, Woman's Hospital, Detroit, Mich.) to George Ernest Tudor, October 17. At home, Detroit.

Geta Haynes (class of 1923, Grace Hospital, Detroit, Mich.) to R. E. Flood, M.D., October 12. At home, Detroit.

Laura Belle Heiple (class of 1919, Latrobe Hospital, Latrobe, Pa.) to Victor Igo, September 3. At home, New Florence, Pa.

Mable F. Hiersche to Neal D. Deming, November 3. At home, Harris, Minn.

Gertrude K. Higgins (class of 1922, Harper Hospital, Detroit, Mich.) to Charles H. Hilliar, September 19. At home, Detroit.

Julia Holt (class of 1925, Indiana University School of Nursing, Indianapolis, Ind.) to Durban Day, M.D., October 15. At home, Indianapolis.

Kathryn Horst (class of 1923, University of Maryland Hospital, Baltimore, Md.) to John Meegan, in October. At home, New York City.

Margaret Miller Jacobs (class of 1923, Carlisle Hospital, Carlisle, Pa.) to Samuel S. McElfatrich, October 15. At home, Phoenixville, Pa.

Melvina Johnson (class of 1917, Grace Hospital, Detroit, Mich.) to Angus McAuley, September 19. At home, Detroit.

Ruth Jones (class of 1921, Allegheny General Hospital, Pittsburgh, Pa.) to Norman Ryle, October 28. At home, New Philadelphia, Ohio.

Alberta C. Ludwig (class of 1923, Altoona Hospital, Altoona, Pa.) to Edgar Fogleman, September 12.

Lora Katherine Martens (class of 1924, Lutheran Hospital, York, Nebr.) to Donald Brasee, September 12.

Edith M. Neldline (class of 1920, St. Luke's Homeopathic Hospital, Philadelphia, Pa.) to Stanley V. Hinkles, October 24.

Mary H. Nevitt (class of 1921, Altoona Hospital, Altoona, Pa.) to F. L. Meek, October 8.

Leatha M. Norris (class of 1918, Allegheny General Hospital, Pittsburgh, Pa.) to Ray Franklin Caldwell, October 31. At home, Pittsburgh.

Marion Parrott (class of 1923, Georgia Baptist Hospital, Atlanta, Ga.) to Doctor Thompson, October 11.

Norma Pierson (class of 1921, Indiana University School of Nursing, Indianapolis, Ind.) to Deprez Inlow, M.D., October 14. At home, Shelbyville, Ind.

Mary P. Ross (class of 1920, Methodist Episcopal Hospital, Brooklyn, N. Y.) to Thornton L. Steers, September 12. At home, Brooklyn.

Elizabeth Russell (class of 1923, Indiana University School of Nursing, Indianapolis, Ind.) to William Bedford, M.D., October 2. At home, San Diego, Calif.

Kathryn Simpson (class of 1925, Indiana University School of Nursing, Indianapolis, Ind.) to Cloin Herd, M.D., October 1. At home, Indianapolis.

Ruby Stroble (class of 1922, Good Samaritan Hospital, Kokomo, Ind.) to Russell H. Bergmon, October 11. At home, Portland, Ind.

Ida Rosalie Vaught (class of 1912, Mercy Hospital, Pittsburgh, Pa.) to Edward John Byrne, October 28. At home, Boston, Mass.

Pauline Brabo Watson (class of 1924, University Hospital, Augusta, Ga.) to Milledge Roundtree Mathewson, November 25. At home, Augusta.

Alma Marie Wiegmann (class of 1915, German Evangelical Deaconess Hospital, Chicago) to Samuel Bayard Lee, November 4. At home, Raleigh, N. C.

DEATHS

Mattie Coale Alpha (class of 1912, University of Maryland Hospital, Baltimore, Md.) on August 11, in New Orleans, La.

Emma Ara Bacon (graduate of Blessing Hospital, Quincy, Ill.) suddenly, on October 2. Miss Bacon was a school nurse, an active member of the First District Association, and a Red Cross Nurse who had worked in 1918 and 1919 in the Extra-cantonment Zone Service, Unit 25. Her record with the Chicago Tuberculosis Institute during the past two years is an enviable one. Memorial services were held in the Lincoln School, Dolton, Ill., October 15, when tributes to her memory were paid by Dr. Duncan Brown, rector of St. James' Church, by Edna L. Foley of the Visiting Nurse Association, Chicago, and by Mr. Bright, Superintendent of Schools.

Veronica Boyle (class of 1897, Mercy Hospital, Chicago) on August 29. Miss Boyle had been doing private duty nursing up to the time she was taken sick. She endeared herself to patients, nurses, and all with whom she came in contact in the performance of her duties. Her many kind acts will gain for her eternal rest. Mercy Hospital Alumnae Association has lost an active and much loved member; all members will miss her very much.

Emma F. Crum (class of 1892, Hackensack Hospital, Hackensack, N. J.) on October 5. Miss Crum served as Superintendent of the Hospital from 1892 to 1900, and for the past ten years as Matron of the Nurses' Home. She was the organizer of the Nurses' Alumnae and was a pioneer worker in the education of the student nurse. The Nurses' Alumnae of the Hackensack Hospital has suffered a great loss in her death.

Mrs. Ruby Willson Davis (class of 1909, Rochester General Hospital, Rochester, N. Y.) on August 18, in Newark, Ohio, after a brief illness from intestinal trouble.

Mary Devoe (class of 1922, Indiana University School of Nursing, Indianapolis, Ind.) suddenly, on October 22, in Washington, D. C. Burial was from her home in Kendalville, Ind. Her death comes as a shock to her many nurse friends.

Mary C. Henry (class of 1890, Orange Memorial Hospital, Orange, N. J.) suddenly, on October 16, after an operation, at Morristown, N. J. Owing to increasing deafness, Miss Henry had been obliged to give up active nursing, but her unfailing brightness and cheerfulness had made her greatly loved by her patients and all who enjoyed her friendship.

Mrs. Howard Whittaker (**Esther Hinkle**, class of 1905, St. Luke's Hospital, Philadelphia, Pa.) on October 5, at Hahnemann Hospital, of gall bladder infection. Mrs. Whittaker will be missed by her many friends.

Greta Mabry died at her home in North Vasselboro, Maine, last winter.

Mildred Overton Magruder (class of 1912, Long Island College Hospital, Brooklyn, N. Y.) in August, in Bois, Iowa. Mrs. Magruder served overseas during the World War.

Annie Robbins of Orlando, Florida, recently. Miss Robbins was a member of the Central Florida Nurses' Club; she had formerly been a member of the Board of Nurse Examiners. She served during the Spanish-American War, winning special distinction in her work, and affection from all. She was a friend, a helper, and a sincere Christian.

Mrs. Charles Lattimer (**Loreta Shearer**, class of 1914, Beth-El Hospital, Colorado Springs, Colo.) on September 13, at Fitzsimons General Hospital, Denver, after a long illness. Mrs. Lattimer spent three years in a Honolulu hospital prior to her marriage.

Gertrude Shields (graduate of Stamford Hospital, Stamford, Conn.) suddenly, on October 4, in Keene, N.H., where she was assistant superintendent of the Elliott Hospital. Services were held in the Nurses' Home, in Keene; burial was at her home, Guleph, Ont. All connected with the hospital pay high tribute to the work of Miss Shields and to her Christian character.

Emelie S. Woerwag (class of 1917, Lankenau Hospital, Philadelphia, Pa.) suddenly, on October 10, in Philadelphia. A loyal, faithful member of the Alumnae Association, she will be greatly missed by all.

BOOK REVIEWS

PSYCHOLOGY FOR NURSES. By Maude Muse, M.A., R.N. Illustrated. 339 pages. W. B. Saunders Company, Philadelphia. Price, $2.50.

Since Psychology as a separate subject has been introduced into schools of nursing, the question of textbooks has been an extremely difficult and unsatisfactory one to answer. "Psychology for Nurses" has not only given us the basic scientific principles, but it has applied them directly and in a practicable way to our professional life and its problems.

The subject matter of the book is arranged in the following general order: *Why does the nurse need to study psychology? The nature and scope of modern psychology, The behavior mechanisms, Native traits and tendencies, Thwarted tendencies, Individual differences, The psychology of learning,* including *Economical learning, Learned mental disorders and mental hygiene.*

The presentation of subject matter is clear with an abundance of well chosen examples from nursing which add much to its vividness. Outlines or pertinent questions precede each chapter. Review questions, tests, problems or simple experiments, found following the chapters, stimulate further reading and encourage speculative thinking. The bibliographies with selected readings will be of especial help to the instructor or reader wishing further aid in selection of material.

There is special emphasis on those principles which will aid the pupil in making better personal adjustments to her new environment. Those which aid her to understand the patients' tendencies toward both normal and abnormal adjustments as well as those which are helpful in redirecting these tendencies are also stressed.

This book should be very helpful, therefore, in courses which prepare for psychiatric nursing, but it should be of equal value to the young pupil as a textbook of a basic science for her nursing life and work.

RUTH SLEEPER, B.S., R.N.,
Boston, Mass.

PREVENTIVE MEDICINE. By Mark F. Boyd, M.D. Second Edition, Revised. Illustrated. 429 pages. W. B. Saunders Company, Philadelphia. Price, $4.

This book is particularly well adapted for a reference book, as the headings and sub-heads make points clearly attainable. For general reading, it will be found in little demand.

Sections with many or few chapters take up "Diseases Due to Invading Micro-organisms: Epidemiology," "Deficiency Diseases," "Occupational Diseases," "Diseases Arising from the Puerperal State," "Special Aspects of Health and Sanitation," and "Public Health."

The subject matter concerning the disposal of excreta, water purification, production and inspection of milk, and occupational diseases is very good; while one wonders concerning the length of space given to fumigation.

Many of the charts seem technical in nature and of little interest to the majority of nurses. In fact, it would seem as if the book were written chiefly for medical students or public health officials.

KATHERINE S. BLAKELY, R.N.,
Montpelier, Vermont.

HUMAN PHYSIOLOGY: A Textbook for High Schools and Colleges. By Percy Goldthwait Stiles. Fourth edition, revised. 435 pages. Illustrated. W. B. Saunders Company, Philadelphia. Price, $2.25.

Here is a book that will prove a real joy to the teacher who has striven to make the facts of physiology tangible and full of meaning to her students. Its valuable data are of great moment to the teacher of nursing, as they make clear the physiological basis for many nursing practices. Because conversant with his subject, the author really presents the *elementary* aspects of physiology and so fulfills his mission "to sympathize" with students "in their perplexities."

His chapter, "To the Teacher," should merit careful consideration. It is a sound principle, he says, to subordinate details of structure to facts of operation. Anatomy is easier to teach, so the physiology of schools (nurse schools are no exception) has been anatomy. There is greater need, he thinks, for a knowledge of physics and chemistry, both of which are more fundamental to physiology, and help the student to "think in terms of molecular and atomic ideas."

Personally I would rather he had made no reference to vivisection,—a question that creates diverse opinions and so does not belong in a textbook, where its presence makes it impossible to either leave it out or ignore it.

The chapter on Reflexes is obvious and concise, one of the few that does make this subject clear. Although I realize his reason for placing the nervous system where he does, it has been my experience that nurse students grasp its intricacies more readily when it follows the heart and circulation, respiration, digestion and absorption, and excretion. Why use the terms coagulation and clotting interchangeably? Are they the same chemically?

The final chapter presages in a future edition more emphasis upon those higher faculties of the human brain that serve as an unanswerable foundation for the ethical life. Even without that emphasis, this book in the hands of a teacher who develops her lessons from an ethical basis will unconsciously make for the desired sense of responsibility in her students. Chapter 30 is an asset to all who think.

LOUIE CROFT BOYD, *A.B., R.N.*,
Denver, Colorado.

MOTHER'S MANUAL: THE COMING AND CARE OF THE BABY. By Dorothy Bocker, A.M., M.D. Illustrated. 213 pages. Brentano's, New York. Price, $2.

The purpose of this book can be given no better elucidation than is found in two sentences of the author's note, namely:

> As the name implies, Mother's Manual is answering clearly and concisely all questions that arise before the baby comes and after it arrives. The whole trend of the book is designed to be used as a reference book to emphasize the prevention of disease and unnecessary discomforts by proper hygiene.

A reading of the table of contents discloses a comprehensive treatment of the essentials in motherhood, baby and child care.

The author evidently possesses a keen appreciation of the influence of the intelligent and well informed mother upon the child's future, and being a physician herself, she could have had no

intention of displacing the importance of the medical supervision in all stages of child life, but a book of this type must take some risk of misuse.

The very specific instruction for a lay attendant at birth, when neither doctor nor nurse is present, as found in Chapter 2, page 41, holds well in assumption, but will it work in actual practice?

The treatment of the anatomical and physiological development of the fetus, infant and child in Chapters 5 to 10 is excellent in and of itself, but is somewhat beyond the understanding of the very type of mother who most needs instruction in the exercise of motherhood and the rearing of the child. Attention is called to the illustration on page 16, the title of which reverts to the use of a term that has long been open to question because of its misleading nature.

NANCY E. CADMUS, R.N.,
Rochester, N. Y.

DIABETES: THE TREATMENT BY INSULIN AND DIET. A Handbook for the Patient. By Orlando H. Petty, M.D. 11 pages. F. A. Davis Company, Philadelphia. Price, $1.50.

Following a brief statement of the nature of the disease and methods of diagnosis, are chapters on food principles, weighing and measuring foods, and methods of estimating diets. Two chapters are devoted to Insulin and its administration at home, and the remainder of the book is given over to sample menus, recipes, and tables of food composition.

As the title states, this book is written for the use of diabetic patients. Since it emphasizes the necessity for a balanced diet rather than the haphazard, unbalanced ration, which is frequently used, it should prove of value in private practice.

NELLIE G. BROWN, R.N.,
Indianapolis, Ind.

BOOKS RECEIVED

BONE SARCOMA: An Interpretation of the nomenclature used by the Committee on the Registry of Bone Sarcoma of the American College of Surgeons. By E. A. Codman, M.D. Illustrated. 93 pages. Paul B. Hoeber, Inc., New York. Price, $2.

THE DIABETIC LIFE: Its Control by Diet and Insulin. By R. D. Lawrence, M.D. A Concise Practical Manual for Practitioners and Patients. Illustrated. 161 pages. P. Blakiston's Son & Co., Philadelphia. Price, $2.50.

EVERYDAY MEALS FOR INVALIDS: A Collection of Tiny Recipes, Tasty and Nourishing, for Every Day in the Year. By May Tremel. Greenberg, Publisher, Inc., New York. Price, $1.25.

An interesting little book of individual recipes, many of which are distinctly British.

THE OPERATING ROOM. By Amy Armour Smith, R.N. Second edition, reset. Illustrated. 383 pages. W. B. Saunders and Company, Philadelphia. Price, $2.25.

PRIMARY HEALTH HABIT CHART. Designed by Frances A. Cook, Director of the Modern Health Crusade of the Chicago Tuberculosis Institute.

An interesting chart with spaces for fifty pupils for four weeks. A booklet of suggestions for keeping the chart accompanies it.

THE VISITING TEACHER IN ROCHESTER. By Mabel Brown Ellis. 205 pages. Joint Committee on Methods of Preventing Delinquency, New York City. Price, $1.

PHYSIOLOGICAL AND CLINICAL CHEMISTRY. By William A. Pearson, M.D., and Joseph S. Hepburn, Ph.D. 306 pages. Lea and Febiger, Philadelphia and New York. Price, $4.

THE MEDICAL DEPARTMENT OF THE UNITED STATES ARMY IN THE WORLD WAR. Vol. XV. Statistics. Part 2. Medical and Casualty Statistics. War Department, 1925.

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